

**Is NHS Implementing Job Evaluation to Follow Principles of
Pay Equity?**

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Executive Summary

Healthcare systems around the world have faced continuous and increasing pressure to reduce costs and increase productivity. In order to remain competitive in today's economic environment, healthcare organizations have employed human resource management strategies. Pay equity is a term used to mean the payment of the same level of wages to people belonging to different genders, races, cultures or disabilities with the same job description. Job evaluation and analysis have become essential in today's working environment to establish equality of pay for all genders, ethnicities and occupations.

To this end, the United Kingdom Parliament has passed several laws not only defining discrimination and harassment but also identifying the rights of the victims as citizens and employees. The National Health Service is a healthcare provider situated in the United Kingdom which operates on the principle of free universal healthcare. Questions have been raised regarding the effectiveness of its job evaluations and its effects on the pay of its employees. These problems may also extend to their partnerships in the private sector, and the quality of healthcare they provide.

The National Health Service has endeavored to find solutions to these issues by creating proposals that are geared toward increasing patient and employee confidence in the healthcare organizations. Presently, it has only partially succeeded in its goals. The objective of this study is to evaluate the job criteria of people employed in the healthcare organizations, thereby enabling them to determine the levels of implementation of pay equity principles.

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Chapter 1: Introduction

1.1 Background

Healthcare systems are facing extreme pressure to reduce costs, become more productive, and create improvements in the quality of service (D'Aunno, et al., 2000). The healthcare delivery system is one of the vital components of the government's public welfare schemes. Healthcare components like accessibility, quality, and cost are increasingly moving beyond the grasp of public. The downtrend in these important components has become a major issue which if not addressed soon may produce serious consequences for the government. The management of healthcare is very challenging; reforms are needed through a comprehensive overhaul of the entire delivery system, and the careful consideration of all pros and cons of developments in the concerned public healthcare areas (Ozcan and Smith, 1998). The serious ramifications of this issue have made this a priority of the concerned authorities. Healthcare organizations are facing several problems; therefore, radical organizational changes need to be introduced to improve the health delivery systems. One important area is the improvement of human resources in the healthcare organizations. In any healthcare setting, resource availability and employee competence are essential to guarantee the attainment of the desired performance level (Franco, et al., 2004). Human resources in UK health organizations have become essential in creating and improving the quality of healthcare delivery. The question that must be asked is: does NHS implement job evaluation that follows principles of pay equity? Pay equity broadly means the payment of the same level of wages to people who are of different genders, races, cultures or disabilities with the same job description. The concept of pay equity deals with the different types of discrimination. This includes the discrimination that happens when women or people of

different colors or races are compensated less than men who have been appointed to positions requiring similar levels of skill, effort, responsibility and working conditions (AFSCME, 2009).

1.2 Objective

The objective of this study is to evaluate the job criteria of people employed in the healthcare organizations, thereby enabling these organizations to determine the levels of implementation of pay equity principles. This objective will be based on the job evaluation system that NHS has implemented for its employees. The outcome of the research would be an assessment of its effectiveness and completeness.

1.3 Statement of the Problem

The National Health Service, or NHS, is the largest healthcare organization of the United Kingdom. The organization employs more than 1.5 million workers throughout the country. Globally, there are only three other organizations which employ more staff than the NHS; this puts into perspective the magnitude of its human resource (National Health Services, 2005). In order for hospitals to provide high quality healthcare, the different professions must work efficiently in teams dedicated to patient care (Lowe and Lowe, 2003). The deteriorating quality in NHS hospitals has increasingly become a major concern. With the challenges caused by changing business equations, the healthcare industry needs highly skilled persons who are able to work under stressful conditions. There are several business aspects that encourage HR strategies to move toward this new work environment using a flexible and versatile approach.

The long waiting list and low quality of healthcare services in the NHS hospitals have become major causes of concern. In healthcare, an innovative approach is needed for successful information dissemination, implementation of new schemes, and acquisition of better resources. In healthcare, both the methodology of the delivery system and the administrative inputs are vital

for success. Despite the state's sizeable spending on the healthcare system, the complexities that encompass the inter-related processes of its various elements are contributing to its falling standard of delivery. Issues and factors affecting the concept of safe hospitals at affordable costs must be addressed urgently to meet the challenges of the deteriorating healthcare services. The study is seen as an effort to gauge the performance outcome of the NHS workforce through an evaluation of their jobs and an examination of factors like pay equity.

In terms of the quality and number of personnel required by the healthcare industry, this study seeks to provide additional knowledge on the issue of pay equity in the NHS by studying the effectiveness of its efforts to implement pay equity principles through a proper job evaluation.

1.4 Purpose of the Study

The purpose of the study is to gauge the extent of the influence of job criteria and job skills on the employee's competitive levels, job satisfaction, and retention. Private equity in the hospital industry also seems to have significantly increased the cost of healthcare without promising any improvements in the quality of service delivery and patient safety; both of which are highly dependent on the individuals who work for these health organizations. Despite the huge spending by the government on the provision of healthcare services to the public, the complexities that encompass the interrelated processes of the various elements of the system still seemingly contribute to its falling standards of delivery. This concerns human resource management in particular.

The hospitals are plagued with increasingly low numbers of staff presence, which is adversely affecting the quality of its health delivery system. This has resulted in long waiting lists and deteriorating qualities of healthcare services. The study would primarily be evaluating

the job description against the existing job profiles of the staff to find out whether the principles of pay equity have been implemented for different genders, races, and cultures in the NHS. The study also examines the impact of such implementation on the employee performance outcome.

1.5 Significance of the Study

The objective of the study is to assess the job evaluation efforts of the NHS to determine whether the organization is able to practice pay equity based on the job content of the different positions. The result of the study is expected to enhance the knowledge on the impact of job evaluation in implementing pay equity principles. This may enable the healthcare organizations to create a restructured healthcare system that is safer, more efficient and manageable, and less costly. Such HR strategies are aimed to help apply national practice guidelines that would simultaneously reduce complexity and variability, and create improvements in the quality of healthcare service delivery for millions of patients (National Coalition on Healthcare, 2004). The study becomes relevant in light of the use of advanced technologies in the provision of healthcare services and where there are chances of having employees from different races, colors, ethnicities, and genders (women, in particular). Human resource being central to the organization's vision and goals, HR leadership initiatives become a crucial factor for creating and organizing an effective workforce.

1.6 Research Hypothesis

The study would seek to find theoretical support for the research hypothesis, which states that NHS implements a poor job evaluation system that undermines the successful implementation of the principles of pay equity in the healthcare organizations.

1.7 Research Questions

The study, while finding theoretical support to the research question stated above, will also find possible answers to the following:

1. Does the NHS implement job evaluation to assist pay equity in its hospitals?
2. Does NHS promote job equity in projects which it forms under public-private partnership?
3. Will pay equity create better working conditions?

1.8 Disclaimer

The research was accomplished after the proper acceptance and authorization of the instructor. The information covered throughout this dissertation has been used with the assurance that copyright and plagiarism issues have been fully covered. The research report was created with intention not to be exhaustive. Although much care has been taken in the research and preparation, business decisions should not be formulated on the basis of this report. The distribution of the research report is subject to the condition that it shall not, in any way of trade or otherwise, be resold, lent, or circulated on a commercial basis without the prior approval of both the instructor and researcher.

1.9 Structure of Report

The paper has been designed to follow the following structure of chapters:

Chapter 1: Introduction

This is the introduction to the dissertation assisted by background, scope and objectives of the research.

Chapter 2: Literature Review

This chapter is a discussion of previous research studies related to human resource management, job evaluation, pay equity and its link to the private and public sectors. This chapter also discusses the importance of quality in healthcare in both sectors. It will also introduce the National Health Service as an organization.

Chapter 3: Research Methodology

This chapter is an elaboration of the research methodology adopted for the research study and the aspects of the research that the research methodology will cover.

Chapter 4: Findings and Analysis

This chapter is a presentation of the findings from the adopted research methodology and literature review.

Chapter 5: Conclusion

The conclusions and recommendations are drawn from the critical literature review and presented in light of the theoretical literature review. They outline the outcome of the critical analysis tool used in the current research.

Chapter 2: Critical Literature Review

2.1 Introduction

In order to compete in today's economic environment, companies must consistently maintain a productive work environment. Human resource planning (or management) is one of the tools employed by companies to reach their goals and anticipate the needs of the market. Among the tasks of human resource planning is the prediction of the traffic of individuals who may enter or leave an organization, and knowing how best to use them as resources in order for the company to achieve its ends (Marie, Muller and Bezuidenhout, 2006, p.248). Healthcare management systems around the world have taken on an increasingly market driven tone in today's economy. Different services in the healthcare industry such as patient care, insurance, service accessibility, and specialists' care may be treated akin to commodity rather than privilege.

The management of healthcare organizations is a relatively new field of research, which is considerably different and challenging as compared to management in other sectors (Fried, 2000). This may be attributable to the complex nature of the healthcare industry in both public and private sectors (Ozcan and Smith, 1998). According to a theory proposed by Anderson and Black, the deteriorating status of healthcare delivery in the United Kingdom and, in turn, around the world may be attributable to the disproportionate level of care provided to the people. It may also show that within a market delivery system, the people who seek healthcare become consumers who have the choice of buying their own preferential level of healthcare (1997). Thus the prices and level of services in healthcare may become essential to healthcare organizations who may wish to constantly improve the quality of their services while maintaining profitability (D'Aunno, et al., 2000).

It can be concluded that in order for healthcare organizations to maintain a certain level of service, they must rely on a quality workforce to deliver the needed work quality. However, in order for the workforce to do so, careful consideration must also be given to the process of job evaluation and the pay equity system. Enabling the workforce to receive pay which they are due on legal and ethical grounds would invariably improve the standards and quality of healthcare delivery.

It has become important in this new era of globalization for companies to look beyond the traditional process of labor deployment and see how it is undergoing a fast transformation, both in terms of quality and quantity (Lemieux-Charles, et al., 2003). With the advent of information and communication technology, there have been several changes in the models of the work environment which may have made it necessary for both employers and job aspirants to be updated of the various improvements that are replacing older models of office efficiencies (Franco, et al., 2004).

The literature review will focus on the various aspects of the main thesis, seeking to know whether job evaluation really contributes to the implementation of the principles of pay equity in the healthcare organizations. First, a reference will be made to the concept of human resource planning and how it relates to job evaluation and pay equity. This will provide an understanding of the core concepts of job evaluation and pay equity by dissecting, analyzing, and presenting various aspects of job evaluation and pay equity as well as their connections to both the public and private sectors in the healthcare industry.

In this chapter, the differences in the quality of healthcare in various areas around the world will then be discussed, and statistical data will be provided to prove its claims. This will not only provide an outlook of the National Health Service with regard to the

concepts of job evaluation and pay equity; it will also provide information regarding the current standards and quality of healthcare in the United Kingdom through the use of previous studies. This literature review will conclude by show how these previous studies relate to the main thesis.

2.2 Human Resource Planning

It has become essential to break down the job description in order to attract employees by means of advertising, and to create an analysis of the job that gives the relative worth of employment within an organization. This can facilitate the recruitment of individuals into the company. Recruitment is a process through which the most qualified applicant can be selected in order to be placed in the organization and help it to achieve its goals most effectively (McConnell, 1993, pp.36-37).

The main purpose of this form of management has been to provide conditions that can satisfy future human resource demands for an organization and to nullify any inconsistencies within the interest of the organization's employees. It also attempts to eliminate losses to the company caused by less productivity, absenteeism, ineffective training regimens, and decreased revenue. It has become an integral part of an organization's structure and function due to its relatively low cost and highly effective results (Advisory, Conciliation and Arbitration Service, 2008).

2.3 Job Analysis

One of the most important aspects of human resource management is job analysis. "Job analysis is the process of systematically obtaining information about jobs by determining what the duties, tasks and responsibilities of those jobs are in the context of a specific job" (Marie, Muller and Bezuidenhout, 2006, p.254). What this has essentially entailed is the analysis of the

job's description and distinction from other jobs in order to form a valid hypothesis concerning its evaluation to human resource managers. It is composed of two stages. The first is the compilation of data and the second is the use of this data in the preparation of job descriptions, job specifications, and job standards. When job description is given, it provides a written statement which contains the obligations, capacity, principle and tasks associated with the job. The job specification discusses the qualifications required, including ability, expertise, knowledge, capacity to meet physical and mental demands, as well as aptitude required to complete tasks that would be assigned (Marie, Muller and Bezuidenhout, 2006, pp.254-257; Rowland, 1997, p.456).

The evaluation of a job is different from its analysis; however, both have shared many of the same data functions which have precluded their involvement in the establishment and recruitment of individuals within a company. It is also important to note that although job evaluation and pay equity may be taken as separate entities, they would not be mutually exclusive terms and may not be taken as such.

2.4 Job Evaluation

Keeping serviceable levels and maintaining quality control have become some of the biggest challenges faced by HR managers and supervisors. This has led to the advent of policies and practices that have made the determination of job description, specifications, and resulting pay rates counter-intuitive. Today's market has grown to require a more systematic and objective approach to job placement and responsibility. In turn, it has become equally essential that supervisors have a working knowledge of current laws and methodologies in the decisions related to evaluating performance and thus deciding wages for their employees.

Armstrong and Baron said that “Job evaluation is a systemic process for defining the relative worth of jobs within an organization” (1995). This has been used to conclude that job evaluation is a coordinated plan that has been used to methodologically ascertain data, leading to suitable conclusions. These conclusions have provided the means to conclude the value of various jobs within an organization. These values assess the contribution to the workplace by the specified jobs and not the people themselves. In effect, it would not show the value of the job within the market in which the company has been said to be competing; rather, it would show the hierarchy of the job within the organization. Thus, it is contended that job evaluation does not have any direct link to pay equity when related to the market, but it is used to determine internal equity among other jobs in an organization (Armstrong and Baron, 1995, pp.13-15).

The main purpose of job evaluation has included the following:

- Quantify the constant quantity of job significance in a manner that is understood by everyone
- Involve managers from the commencement until its dispensation and its eventual modification
- Quantify the significance of the job itself and not the individuals who are doing it
- Pertain to broad clusters in functional groups (Armstrong and Baron, 1995, p.16).

2.4.1 Basic Approach

The basic approach toward job evaluation begins with decisions made by the administrative body regarding the nature of the organization. Decisions need to be made concerning the number of jobs required and how many of them need to be evaluated.

Additionally, there have been decisions regarding which schemes need to be employed in these evaluations, whether they must be done on a case-to-case basis or using separate with different

levels of responsibility. Once these decisions are made, the actual methodology of job evaluation is put into place.

The methodology of job evaluation consists of four stages. The first stage is comprised of the collection of data which is directly related to the responsibilities of the job itself and the prerequisites required in order to function effectively within the organization. The second includes the selection of compensable factors which determine the significance of the job within the organization. This is said to include common factors such as ability, effort, familiarity, responsibility, problem-solving ability, accountability, and physical and mental demands. The identification of these factors has been followed by the definition of their significance within the work concerned. The third stage has been argued to be the most essential. It is one where the schemes in the jobs that may be evaluated are discussed (Marie Muller and Bezuidenhout, 2006, p.258; Rowland, 1997, p.456).

There are two scheme types by which jobs are evaluated. They are analytical and non-analytical job evaluation schemes. Analytical schemes have been used to define the extent to which the aforementioned compensable factors may be defined in order to present the relative worth of the job in question. Non-analytical schemes have been employed to ascertain the value of the job without considering such factors or the essential elements of the job being referred to. Other schemes which encompass its broad definition include single factor based schemes, market pricing and management consultants' schemes (Armstrong, Cummins, Hastings and Wood, 2005, pp.4-7).

2.4.2 Analytical Schemes

Analytical schemes are divided into two fundamental methods: the factor comparison and the point method. The factor comparison is a quantitative method that employs the use of the mentioned compensable factors by ranking each one in order of significance in relation to the job at hand. Once each aspect of the job has been ranked, the factors are allotted fiscal merit depending on their importance in the concerned job. However, it has been seen as a cumbersome process since assigning the financial values to these factors in order to translate their worth into actual pay equity can be time consuming (Thorpe and Homan, 2000, p.238).

In the case of the point method, it has been said to be the most widely used method to evaluate jobs. It is based on the same principles as the factor method, but it differs by using the concept of points rather than revenue in order to gauge the importance of the aforementioned compensable factors. A range of points may be assigned to each individual factor, which provides the company the importance of each factor in comparison to another. When the points of these factors are allocated to the aforementioned job, it can be used to arrive at a conclusion regarding the overall hierarchy of the job in question. Once such a hierarchy has been established, the financial value of the job can be ascertained within the chain of command (International Labour Office, 1986, p.80; Solomon, 1997, p.88-89).

An example of this would entail paying more to those above the chain rather than below. This, as previously mentioned, is the most commonly used job evaluation scheme in organizations today. However, although its use provides a secure system over time, it has the weakness of having high administrative costs and it does not prove itself open to practical use within smaller organizations (Berger, 2008, pp.100-104).

2.4.3 Hay Method

The Hay Method of job evaluation is an analytical method developed by the Hay Group that has been the most widely used proprietary method in both public and private sector organizations in Britain for the past 30 years. It was developed by the use of a research program which employed data from several thousand jobs, identifying the key elements which formed a basic relationship to most jobs. The Hay Method may be used to employ the analysis and measurement of three elements, which are know-how, problem solving, and accountability (Poels, 1997, p.57).

The Hay Method further states that these three elements have further sub-elements and are affected by environmental and physical factors. The know-how element consists of an understanding, ability, and aptitude to not only do the job but also to have the ability to employ specialized knowledge related to the work, organize and manage a network of relationships, and keep them established in order to achieve results (Bramham, 1994, p.54). The problem-solving element may show an aptitude to analyze and evaluate a situation and offer suggestions within the boundaries of originality and policy set by the company in question. Finally, accountability includes the responsibility of the individuals within their job set. It may be directly affected by the amount of freedom of the individuals to act within the job and the amount of impact they have on their peers. The factors that can contribute to the performance of these elements, namely the physical and environmental factors, are concerned with the amount of pressure placed on the individuals as well as the working conditions provided for them carry out their daily tasks (The Hay Group, 2009).

2.4.4 Skill-Based Schemes

These schemes are used to determine the various compensable factors required by individuals at various levels. These factors are then equated toward the responsibilities held by individuals within their job description in order to ascertain whether they can carry out their tasks at that level. Thus, in order to ascertain the amount of skill the individual has with regard to the job, various factors are assigned importance within the job description (Cooper and Locke, 2000, pp.18-20).

2.4.5 Market Pricing

Market pricing is a scheme that has been used either individually or in conjunction with other job evaluation schemes in order to ascertain the pay equity within various organizations. This method has employed the use of market appraisals of various jobs in order to fix rates and employ policies within an organization. It should be noted, however, that this is not considered a method of job evaluation in certain academic circles and merely provides a guideline for the pay structure, which may be adopted by various companies. Oftentimes, internal evaluations directly related to analytical schemes may be used in conjunction with this scheme in order to ascertain the pay grade of various employees (Armstrong, Murlis and Group, 2007, pp.139-140; Armstrong, Cummins, Hastings and Wood, 2005, pp.23-25).

2.4.6 Single-Factor Schemes

Single-factor schemes are those that, in accordance with its name, employ the use of one compensable factor in order to evaluate various jobs. There are two methods which may be employed: the first is decision banding and the second is time span of discretion. The decision banding scheme is based on the principle that every job demands a certain standard of decision

making. The hierarchy of the job in question within the organization provides the level of responsibility attributable to various decisions.

Time span of discretion is the maximum amount of time in which an employee may act with anonymity without any authority imposed by the supervisors. The various components of these schemes are dependent on certain variables such as the difficulties of the job itself and the employees' perception of time; thus, this cannot be seen to be feasible in practice (Rees and Porter, 2001, p.154).

2.4.7 Non-Analytical Schemes

As mentioned before, non-analytical schemes have not taken the compensable factors into consideration. Rather, they have compared the entire jobs with each other without considering the factors that provide their makeup. The schemes that may comprise this form of job analysis can consist of four types. The first method may be one of job ranking, which establishes the hierarchy within various jobs (Solomon, 1997, p.83). The second can be paired comparison, which also establishes the ranks of various jobs by using statistical measurements. Job classification is the scheme which establishes a correlation between various jobs and job grades by comparing both. The last scheme is considered to be internal benchmarking in which jobs are compared with benchmarked jobs that have already been graded. These benchmarked jobs are assumed to have been graded correctly and may be used to correlate jobs according to a broad comparison (Treiman, 1979, pp.2-3).

2.4.8 Management Consultant Schemes

Management consultant schemes are various methods of job evaluations, which are developed by external organizations and leased to various industrial, service and public organizations. Once the various schemes detailed above have established the evaluation of

various jobs, the use of benchmark jobs may be employed in order to understand the evaluation of jobs with less obvious qualifications. They may also be used to match these jobs with other organizations in order to establish a market rate for these types of jobs. As mentioned before, benchmarking is also one of the schemes used to evaluate jobs. However, in this case, it may be used to identify a less obvious range of job descriptions.

Once the benchmarking is completed, there may be an exploration of the relative values inherent in various jobs. Characteristic elements such as the relationship with other jobs, level of responsibility, and impact on resources are also considered. The penultimate part of job evaluation is role analysis where the systematic information regarding the role the job requires from the employee may be presented as an answer to a structured questionnaire. Finally, the last portion of the job evaluation establishes pay rates or fixes individual rates for the job in question (Wright, 2004, pp. 54-55).

2.4.9 Compensation Strategy

In order to meet their goals, it is essential for various organizations to adopt strategies that not only meet their goals but also meet the needs of their employees. The compensation strategy is geared toward creating an environment that can attract and keep employees. In order to accomplish this task, the compensation strategy follows four key elements. The first is the compensation philosophy, which is based on an organization's structure and culture. Financial constraints, which show how much the company is willing to compensate its employees, is an element based on the financial situation. The total rewards program details how an organization may reward those who perform well and provides the structure for administering pay. The structure for administering pay may encompass a strategy that allows certain elements to be

managed fairly. Among these strategies include elements such as pay grades, pay ranges, and salary guidelines (Bogardus, 2004, pp. 88-92).

2.5 Legislations in the United Kingdom

2.5.1 Equal Pay Act of 1970

It was not until 1970 when the United Kingdom Parliament passed the Equal Pay Act following the passage of a similar act in the United States in 1963. This act allowed the enforcement of several laws which brought equal rights for treatment and employment of women in the workplace. It modified all existing employment contracts in order to make them more equitable to those of men in the workplace. It also demanded equal value within the workplace for all women as long as their job descriptions are broadly related to those employments held by men. However, these differences must not be of practical importance in the workplace. It was fully legislated on December 29, 1975. It should be noted, however, that although this legislation encompassed equal pay for women, it does not include any proposal for equal pay for minorities who have a much larger pay gap in the United Kingdom than women (United Kingdom Parliament, 1970).

2.5.2 Sex Discrimination Act of 1975

The Sex Discrimination Act of 1975 was an amendment to the Equal Pay Act of 1970. It was created in order to affect laws that prevented both direct and indirect discrimination against women. It was written in various law provisions, which defined discrimination against women in the workplace. It spoke of discrimination as being defined by certain considerations within areas of employment. It could encompass situations in which men had advantages over women in terms of treatment. It also wrote into effect a statute which proposed that discrimination encompassed women not being treated equally to men as long as the number of women who

were under such conditions are considerably lower than the number of men as well as in such cases where they were in larger number than the men (United Kingdom Parliament, 1975).

2.5.3 Equal Value Regulations of 1983

The Equal Value Regulations of 1983 were another significant amendment of the Equal Pay Act of 1970. The original Equal Pay Act was a huge step for the women's civil rights movement in the United Kingdom in the 1970s. It instituted conditions of employment, which specified that women in the workplace must be paid the same as the men as long as their work could be compared to that of men in the workplace. However, the term "like work" within the document created certain difficulties for women who sought equal pay. The term merely specifies that employment pay held by women is comparable to those of men according to their job description and not the standard definition of such work. Employers may have often taken liberties in their compliance with the act's original intent. These regulations passed in 1983 changed this by standardizing women's pay as being comparable to pay over various types of employment (McCrudden, 1983).

2.5.4 Race Relations Act of 1976

This was the first act in the United Kingdom that was solely developed toward Pay Equity for people of different races. The document is notable for defining direct and indirect discrimination in terms of race, ethnic, or national origins. It also passed into legislation proposals that protected such individuals from maltreatment and imposed drawbacks as when compared to other people in the workplace. Such proposals were suggested in the areas of social security, healthcare, social protection, and social advantage. It was further amended in 2003 to include a new definition for indirect discrimination according to the legislation and a new definition of harassment according to a person's race, ethnic, or national background. The new

amendments also removed the size of partnerships that could discriminate against such people and also spoke of the proof required to bring prosecution against charges of discrimination in a court of law (United Kingdom Parliament, 2003).

2.5.5 The Disability Discrimination Act of 1995

This act was passed in 1995 and may have been created to hinder the unlawful discrimination against disabled people in regards to employment, procurement of goods, facilities, services, administration of a property, make stipulations regarding the employment of the disabled, and to establish the National Disability Council. The act not only defined a disabled person as a person who has a disability related to his or her physical or mental functioning that may have a long-term undesirable effect on his or her day to day activities, it also provided regulations for properly defining an individual as being disabled. The act may also be notable for creating proposals to protect disabled people from discrimination in the workplace and ensuring the educational rights of such people. The act also brought in law statutes that formed the National Disability Council (United Kingdom Parliament, 1995). The act was further amended in 2003, adding new definitions for discrimination and harassment as well as imposing fines on employers who undertake such actions. It added several new sections, which specifically speak of proposals forbidding harassment and discrimination of such individuals in the workplace. It also authorized the Disability Rights Commission to enforce such legislation (United Kingdom Parliament, 2003).

2.5.6 The Employment Equality Regulations of 2003

These regulations enacted on December 1, 2003 were created to protect individuals from victimization and harassment due to their sexual orientation by defining the statutes surrounding employment contracts in the United Kingdom. It provides regulations that give details on how

such contracts may be decided. It also provides protection for individuals from sexual discrimination by their employers in the workplace. It has several sections that specify the terms of discrimination in various areas of employment in the United Kingdom and also prohibit discrimination against the procurement of goods, facilities, education, and public services (United Kingdom Parliament, 2003).

2.5.7 The Employment Equality (Age) Regulations 2006

The Employment Equality (Age) Regulations was passed into law in 2006. It protects individuals from harassment and discrimination in the workplace on the grounds of their age. The regulations may not only provide protection for the employee but also for the employer as it establishes regulations regarding age which would allow an employer to keep an employee under contract. It also provides the employee with legislations protecting their pensions and death benefits (United Kingdom Parliament, 2006).

2.5.8 Equality Act of 2006

The Equality Act was passed in January 2007 and was created to provide equity in all areas of employment and services in the United Kingdom. It speaks about outlawing discrimination on the basis of religion or belief and also against discrimination in provision of services due to sexual orientation as well as promoting equity in gender roles in the workplace. The act also proposed the creation of the Equality and Human Rights Commission, which replaced the Commission for Racial Equality and the Equal Opportunities Commission and the Disability Rights Commission (United Kingdom Parliament, 2006).

2.5.9 Equality Act of 2007

The Equality Act of 2007 provides further legislation to prohibit discrimination on grounds of sexual orientation in the procurement of facilities, goods, education, and public

services. It also provides requirements by which standards of discrimination may be addressed and an assertion of unlawful action may be brought before a court of law (United Kingdom Parliament, 2007).

2.5.10 Equality Bill

The Equality Bill is a proposal that has been published in 2009 with the aim of being passed as a law by spring the following year. The goal behind this bill may be to merge the framework for discrimination legislation in the United Kingdom as well as tackle problems with equality and discrimination, which continue to persevere. The bill not only harmonizes previous legislations, it also provides proposals to lessen socioeconomic boundaries and gender pay gap using public services to improve equality and changing definitions of discrimination and harassment to include a much broader viewpoint (Government Equalities Office, 2009).

2.6 Link of Pay Equity to Job Evaluation

As mentioned before, Job Evaluation and Pay Equity are not mutually exclusive concepts. Rather, they are part of the same process of wage determination within organizations. The importance of job evaluation may be directly related to the establishment of Pay Equity. Job evaluations are essential to the determination of both internal and external equity. Internal equity is the value of the job within the organization according to an established internal hierarchy while the external equity is the comparison of internal equity to market rates. Generally, the compensation plans for jobs within organizations are set according to the internal or external equity rates. Thus, those individuals in a managerial position may be paid more than those in a candidate position. It may follow that the financial revenue of the organization is dependent on the increasing or decreasing number of employees (Caruth and Handlogten, 2001).

2.6.1 Outlier

Occasionally, there will be certain occupations that have higher or lower compensation rates due to market demand thus causing the underpayment or overpayment of such individuals. Such occupations are known as outliers. Outliers may not be affected by market rates and are more prone to compensation rates decided by internal equity. Hence, it is important to give consideration to the fact that certain professions have a high and low outlier due to a higher or lower number of candidates respectively. An example of a high outlier would be of physicians practicing cardiac surgery who tend to be overpaid and one of low outlier being nurses who tend to be underpaid (Solomon, 1997).

2.6.2 Incentive Plans

Incentive plans are those in which an employee may receive some form of bonus due to an increase in performance judged by pre-decided indicators. Incentive plans have generally been seen as essential in organizations in order to achieve integration among staff. The application of such incentives may be in the form of annual leave, payment rates, sickness policy, improving working lives initiatives, flexible working initiatives, and the overall terms and conditions of employment (Solomon, 1997, pp.95-99).

2.6.3 Pay for Performance

Pay for performance refers to the implementation of a new organizational structure, which has been adopted by the Health Maintenance Organizations in the United States and the National Health Service in the United Kingdom within the last 10 years. The pay for performance plan is used to decide internal equity within these public organizations using performance indicators similar to those used in incentive plans. A 2007 annual survey conducted

by Hewitt Associates found that 90 percent of companies in the United States use some form of pay for performance program (Berger, 2008, p.544; Kovner, Knickman and Jonas, 2008, p.423).

2.7 Job Evaluation and Pay Equity in Private Sector Health Organizations

In order to construct a compensation plan, which may include considerations for job evaluation and pay equity private hospitals and organizations, companies may delegate such work to a consultant. However, it should be noted that companies who undertake the decision to outsource their compensation concerns merely delegate the process of data collection, published wages, and salary surveys. All administrative decisions are undertaken within the organization. Two systems which are most commonly employed for job evaluations in private sector health organizations are point systems and the Hay Method. A survey of 316 companies, of which 55 percent were from the private sector, found that 32 percent of the private sector companies that used a job evaluation system used the point systems while 68 percent used the Hay Method (Armstrong and Baron, 1995, pp. 279-84).

2.8 Job Evaluation and Pay Equity in Public Sector Health Organizations

Compensation plans, job evaluation, and pay equity in public healthcare organizations are usually decided by the use of alliances and networking between different hospitals. Thus, they may conduct their own evaluations of internal equity in order to ascertain the pay rate. They can do this by employing a joint task force, which can identify several performance factors directly related to different professions within the medical industry. The other method to accomplish this internal evaluation is for individual hospitals to employ a point plan in order to form their own database for job analysis and evaluation. The difference between these two methods is that by employing a taskforce, public health organizations can employ standard pay grades for different occupations while the hospital job evaluations can provide information to establish individual

hospital pay grades. The system that is most commonly employed in public sector health organizations is the Hay Method. A survey of 316 companies, of which 66 percent were from the public, found that 32 percent of the public sector companies that used a job evaluation system used the point systems while 68 percent used the Hay Method (Armstrong and Baron, 1995, pp.279-284).

2.9 Quality of Health Care in Private and Public Health Care Organizations

In order to assess the effectiveness of private and public healthcare organizations, it is important to use quality of care as one of the measures of assessment. Implementation of performance measures and the use of these results are essential in order to promote the best healthcare standards. This is essential in attaining patient and physician satisfaction (Tooker, 2005). In China, arguments against the quality of care have actually resulted in the legislation banning private practice in rural areas. They have provided data which shows that the level of private care is lower than that of public institutions since they are not geared toward promoting preventative care (Meng, Liu and Shi, 2000).

On the other hand, in Africa, it has been found that private healthcare providers are the most important sources of healthcare and pharmaceutical needs in the country. However, its public health sector is severely lacking in proper funding and providing benefits for its constituents (Prata, Montagu and Jefferys, 2005). Another study conducted in middle- and low-income countries found that there is a growing concern over the guidelines and protocols established by local pharmacies despite their importance in promoting healthcare (Smith, 2009).

Another comparative performance survey conducted in Sierra Leone found that the workforce in government hospitals to maintain a higher level of HIV-infected supplies in comparison to private hospitals due to a shortage of knowledge and resources among the

population (Kingham, Kamara, Daoh, Kabbia and Kushner, 2009). In order to maintain the quality of healthcare in several countries, the decentralization of the healthcare delivery and financial system has been recommended in order to cut costs without impacting the quality of care provided. Decentralization refers to separate entities assuming responsibility for both these institutions in an effort to create better performance levels (Geyndt, 1994, p.55).

2.10 Working Conditions in Private and Public Health Care Organizations

Companies in private and public healthcare organizations are constantly trying to improve working conditions and environment for their staff as one of the incentives for their continued performance at work. With the increasingly deteriorating world economy, there have been apprehensions regarding the quality of work life in the public sector. This is especially true considering the increasing practice of non-permanent employment (Virtanen, et al., 2006). There has been a growing concern within the public sector, however, of the increasing privatization of hospitals due to financial incentives. There are concerns within the healthcare industry that with increasing privatization of healthcare, the call for individual contracts within the public sector will cause the equal pay for work aspect to disappear and affect the rights and dignity of medical practitioners (Soumeli and Nergaard, 2002). However, there is evidence that there is a greater deal of stability in the public sector compared to the private sector and that if public organizations paid wages that were comparable to those in the private sector, it would increase employment in said sector (Bellante and Link, 1981).

2.11 Public-Private Partnerships

Before this aspect of the healthcare system is delved into, it is important to first consider what public-private partnerships actually are. Public private partnership rather than be defined as privatization of certain aspects of public sector healthcare may actually be an undertaking by

both sectors in order to share the responsibilities of a task in order to reach a successful outcome. Perhaps, the most prolific example of this system is in Africa, where the public sector healthcare does not have many inroads into the African population and thus, cannot effectively deliver unto them the medicines and healthcare they would require to survive. In order to resolve this problem, the government is using its partnership with companies in the private sector to ensure that there is a wider distribution net not only for pharmaceuticals but also for healthcare among its people (Widdus, 2001). Other partnerships in recent years have included the medicine and reason project in Austria, which was created to provide flyers with disease and treatment options for patients as well as an online component with the same information accessible, along with guidelines for doctors. The project printed 260,000 flyers and provided 18,000 guidelines, all at a reasonable price. Another project from Denmark known as the Infomatum has an objective to increase the existing standard of knowledge of doctors regarding medicines so that they may make better decisions regarding their patients. To date, a website along with a book has been created in order to complete this task (Pharmaceutical Forum, 2008).

2.12 National Health Service

The National Health Service was launched 60 years ago and is currently the world's largest publicly-funded health service under the Department of Health. It operates upon the ideal of free universal healthcare and is open to 60 million residents of the United Kingdom. The name of the National Health Service may be used in reference to four public sector healthcare organizations in the United Kingdom. The system of NHS operates not only in England but also in Northern Ireland, Scotland and Wales. Each of the system operates without a central body, meaning, they are autonomous from each other and is politically attached to its respective government. It does not discriminate against any individual in terms of services in the

United Kingdom. Any resident who is a member of the National Health Service may receive treatment in another.

The NHS is known to employ more than 1.5 million people in the United Kingdom. 1.3 million of these individuals are situated in England. It hires 90,000 hospital doctors, 35,000 general practitioners (GPs), 400,000 nurses, and 16,000 ambulance staff who cater to patients in England, Scotland, Wales, and Northern Ireland. On a 36-hour average, the system deals with 1 million people, with each general practitioner treating 140 patients every week on average. It spends 60 percent of its budget to pay the staff and 20 percent on drugs, with the rest being used for various reasons such as equipment or training (National Health Service, 2009).

Currently, there is an allocation of one hundred and £64 billion pounds to the National Health Service between 2009 and 2011, of which £80 billion will be used in 2009-10, and £84 billion will be used in 2010-11. It has recently established a new agreement in November 2008 with successful negotiation of the new Pharmaceutical Price Regulation Scheme. This scheme will save their companies' funds to the tune of 350 million pounds a year in 2009-10 and 550 million pounds thereafter.

Although the National Health Service was originally established as a free universal healthcare system, it has since been systematically started to become more privatized and has dismantled various health services. Due to their increased capital spending in the 1970s and increased financial losses in the '90s, the NHS changed their modus operandi and became more business-like. It has consulted its staff and general practitioners to act more like businessmen rather than doctors offering free healthcare. The original concept of service integration and cost sharing disappeared and the current organization adopts a more case by case based policy (Pollock, 2004, pp.1-46).

In 2008, the National Health Service began an expansion of its patient choice program based on survey, which showed that an overwhelming number of patients, 65 percent, wanted choice of treatment. This program entails that patients would be given a choice which specialist they wished to see within any hospital covered by the National Health Service, and they may choose between being treated by private hospitals as well as National Health Service providers. These choices would not be applicable when it comes to maternity issues and mental health (Department of Health, 2009). The National Health Service currently provides several services including those related to doctors, hospitals, social care, opticians, minor injuries and walk-in centers.

2.13 The Constitution

The National Health Service Constitution was published on the 21st of January 2009 and established the principles and values of the National Health Service. It provides for the first time in its history guidelines for what its patients, staff, and the general public can expect from the healthcare system. It also provides guidelines regarding rights and responsibilities of the patients and staff affiliated with the National Health Service.

The National Health Service Constitution provides seven key principles which are said to embody the guiding values of the NHS. They are as follows:

- Provision of comprehensive health services to all individuals regardless of age, gender, race, disability, sexual orientation, religion, or belief. It further speaks of its duties regarding the promotion of equality in its services and providing improvements in sectors which require it
- Provision of health services according to need, not payment, with an emphasis on free healthcare

- Provision of the highest standards of healthcare, with an emphasis on training and management toward achieving said goals
- Provision of services according to the preferences of the patients, their families or those who take care of them
- Working with private, public, and third sector organizations to provide improvements in healthcare for the interests of their patients
- Providing the best healthcare indicative of public funding
- Accepting accountability for its decisions regarding the organization and the patients and the communities it serves (Department of Health, 2009).

2.14 Previous Studies

A survey conducted by the job evaluation handbook of approximately 1,000 organizations concerning their job evaluation methods had a response rate of 33 percent with 316 organizations responding. According to the book, 24 percent of the respondents were from the public sector, 33 percent from the private manufacturing sector, 36 percent were from the voluntary sector, and 7 percent were described as being from another sector altogether. The survey showed that 59 percent of these organizations employed 500 people or more, 32 percent employed between 100 and 499 people, and 8 percent employed between 50 and 99 people, with 1 percent employing less than 50 people (Armstrong and Baron, 1995, pp.13-35).

Of these respondents, a total of 55 percent were found to use job evaluation techniques. Of these, 66 percent were in the public sector, 52 percent were in the private sector, and 55 percent were respondents who described themselves as being from another sector.

Among the ones who said they did not use a proprietary system, the point's factor rating classification scheme was said to be widely used. However, 34 percent said that they had to customize the scheme for their own uses.

According to the answers provided by the questionnaire, 68 percent of them used a proprietary brand scheme of which the Hay Guide Chart was the most popularly used at 78 percent of the respondents at some or all levels of their organization. Forty-six percent of respondents said they used the Hay Guide Chart at a managerial level while 28 percent said they used it at all levels of their organization (The Hay Group, 2009).

Among the respondents who did not use job evaluation, 41 percent said they used supervisory judgment in these cases. While 36 percent made use of market rates, 26 percent said they used skill-based systems. Moreover, 14 percent used pay statistics and 12 percent cited union negotiations. Six percent cited individual negotiations, and finally, 6 percent said they used other means to decide the pay rate of their staff. Among these, 45 percent did not use job evaluation techniques, and 22 percent cited plans to implement such a system in order to establish a fair and balanced pay rate. Sixty-one percent of these individuals purported to establish their own customized scheme of job evaluation while 19 percent said they would employ proprietary systems in this case. Sixty-five percent of the respondents said they were satisfied with their current job evaluation scheme, with 21 percent expressing some dissatisfaction and only 4% being completely dissatisfied (Armstrong and Baron, 1995, pp.279-84).

According to the Department of Health, the biggest constraint facing the National Health Service today is the shortage of human resources (Department of Health, 2000). With the increasingly rising demand for healthcare, surveys have shown that the National Health Service

is experiencing one of the worst shortage of nurses in its history. The survey found a fall of 26 percent in qualified nurses between 1990 and 1998. Additional information from the survey showed that the biggest issues facing the organization involve the retention of nurses who have already been recruited (Newman, Maylor and Chansarkar, 2002).

According to Humphrey and Ehrich, when they studied the real-world implications of the policies set by the National Health Service, they found that the policies of the National Health Service directly impacted human resource management and had a direct effect on the standard of care despite not being intended for such a purpose. The article also stated that the long-term effects of such policies are vague due to effects detailed previously (2003).

A survey by Newman, Maylor and Chansarkar found that the Health Service had considerable difficulties retaining nurses of Grade D and E. Grade D refers to those nurses who are responsible for direct care and Grade E nurses are considered as replacements for Grade G nurses as well as providing direct care. Grade E is considered senior to Grade D. Reasonings behind the fall in retention included but were not limited to longer working hours, heavy workloads, staff shortages, inability to finish work at the end of shifts, overtime work not rewarded, lack of funds for training, vacancies not being filled, and a fostering of a culture where nurses pay for their own training. The survey further found that job satisfaction was the number one reason for retention among nurses with job characteristics and personal motivations taking subsequent places (Newman, Maylor and Chansarkar, 2002).

Another study on the methods employed by the National Health Service to benchmark its various institutions found that the main method used by the NHS to gauge performance was a balanced scorecard. This balanced scorecard not only acted as an indicator of performance, but also provided a framework for future financial growth (Chang, 2007).

However, the study found that this scorecard was not viable as a strategic management tool since it does not take into account the various goals of healthcare organizations. The study also found that the scorecard did not serve the public trust, rather, was more politically motivated and cited targets for delivery of healthcare which were unfeasible and did not significantly impact local operations or performance. Instead, it merely created perceived performance levels from its various constituents in order for the NHS to secure its various shareholders and thus its monetary concerns (Chang, 2007).

Within these performance evaluations are also proposals for clinical governance of doctors, which have been perceived by doctors in the National Health Service as being an imposition rather than a prospect. They see such governance as a compulsion put upon them rather than an opportunity (Som, 2005). Another study showed that the fault may not lie in clinical governance of doctors but rather in the management which does not have the skills or training to engage with their colleagues (Davies, 2006).

2.14.1 Job Evaluation in the National Health Service

After the Second World War and the formation of the National Health Service, there was no formal job evaluation or pay equity system in place within the organization. The negotiations for pay structures would be primarily handled by bargaining on a case by case basis and would remain relatively unchanged for the next 40 years. The General Whitley Council and several other committees and sub-committees were responsible for these negotiations.

It was only thereafter that in the 1930s when the NHS abandoned the bargaining structure and introduced a system of clinical grading. One of the most well-known forms of this system was the type that was attributed to nurses and midwives. The grading system used grades A to I to gauge the skills and competency of various nurses. This methodology was similar to the job

evaluation analytical scheme known as the point method. Much like the point method, the grading system used various factors inherent to nursing or any other position in an effort to form a financial hierarchy within its hospitals.

The establishment of such grading practices was followed by the introduction of independent pay reviews in 1971. These pay reviews held a similarity to the market pricing scheme as it took information from various sources and using this recommended pay increases. It also used these sources to do various job analyses and to form various job descriptions. Despite this, certain staff continued to use bargaining in order to increase their pay grades.

It was not until 1992 that the NHS introduced new grading and pay structures which were based on existing job evaluation systems. One of the systems this structure was based on was the Hay System, which was purported to be one of the most widely used evaluation systems in the world. Once the new system was in effect, discrepancies emerged in salaries between individuals with the same job description but differing in occupational backgrounds. Problems with establishing pay grades also cropped up and this led to low pay grades in the National Health Service, leading to problems with employment and retention of individuals. It can be clearly seen through this that the National Health Service at this time did not only have a compensation strategy for its employees, but had also not fully implemented any job evaluation system, leading to unequal pay among its employees. Thus, inevitably, the path to the decentralization and increased privatization of the National Health Service was paved (Department of Health, 2004).

2.14.2 Pay Equity

Before the inception of the Pay Equity Act of 1970, the female medical staffs were paid lower rates than their male colleagues despite equal pay being promised by The Royal Commission on Equal Pay in 1948. As mentioned above, although the Equal Pay Act made such

gender gaps illegal, the concept of “like work” or similar work under a job evaluation scheme restricted the effect of such laws in healthcare. It was not until 1984 that an amendment to this act considered that women could carry out work of equal value as their male counterparts. Currently, the National Health Service has a single-job evaluation scheme, which supports a review of their pay policies. They have created three pay hierarchies that cover doctors and dentists, professional groups, and remaining non-pay body staff (Department of Health, 2004).

2.14.3 First Job Evaluation Working Party

Created in the mid-1990s, the First Job Evaluation Working Party was to review various job evaluation techniques and to develop a “kitemarking” system in order to meet equality standards set by the health reform legislation in 1992. Through kitemarking, they would use a number of schemes within the National Health Service in order to determine which one of them functions best.

Not only did this committee wish to find a job evaluation scheme that would meet all the criteria of the National Health Service but also employ a system that would ensure that there was no discrimination among its employees. The findings of these tests showed that not all criteria would be met by kitemarking schemes. It was decided that the only way for the National Health Service to achieve its criteria would be to tailor its own schemes according to its own specifications (Department of Health, 2004).

2.14.4 Agenda for Change Proposals

In 1999, the National Health Service, in an effort to modernize its pay structure published a set of proposals known as the Agenda for Change, which proposed a single-job evaluation scheme to cover all employments in the National Health Service and using it in order to review payment plans as well as other terms and conditions for their health service employees.

Following the publishing of this paper, the National Health Service reformed the Job Evaluation Working Party to create a new job evaluation and payment structure for their organization. In order to accomplish this, they first identified the key factors that were central to any work associated with the National Health Service. Once they identified these draft factors, they refined them by means of a questionnaire and then set “draft levels of demand” for each factor. These draft levels were then used to create a specific questionnaire, which was reviewed by job analysts to ensure their accuracy. Then, results of this survey were input into a computer database, and the results of the scoring were used to match them to jobs which would be suitable. This was continued to be developed over time. This development includes the use of computerization in order to automate the job evaluation system (Department of Health, 2004).

2.14.5 Equality Features of the Scheme

In order to ensure equality in its job evaluation scheme, the National Health Service certified that there were certain characteristics in its construct. The features which promote equality in this system are as follows:

- There were a significant number of factors being considered.
- There was an inclusion of specified factors in order to ensure that jobs, which are predominantly occupied by the female gender such as nursing, are fairly measured.
- A conscious avoidance of the use of the factor level definitions in defining the skills of an individual and thus operating in a discriminatory manner.
- The scoring and weight portion of the evaluation are fabricated in order to reflect the principles of gender neutrality. It is also to ensure that no responsibility factor is given preference over another.

- A detailed overview of the matching procedure was also taken in order to ensure that all the jobs being evaluated were done according to the national benchmarks associated with them.
- Insurance that there is no bias within the process.
- The use of a thorough job analysis questionnaire in order to make all pertinent information was made available for local examinations (Department of Health, 2004).

2.14.6 Job Evaluation in the National Health Service

The current job evaluation structure of the National Health System is based upon a mixture of the Point and Hay's Method. The job evaluation measured various factors that were used to conclude further based on the skill level of the individual in the given factor and the nature of the factors being measured. The factors which encompassed the job evaluation included communication and relationship skill, knowledge, training and experience, analytical and judgmental skills, planning and organizational skills, physical skills, responsibilities for the care of the patient, policy and service responsibility implementation, financial and physical resources as well as for human and information resources. Other factors included the freedom for research and development as well as the freedom to act, the physical, mental and emotional effort and finally the working conditions available (Department of Health, 2004).

2.14.7 Current Job Evaluation Structure

With the inception of the agenda for change, the National Health Service instituted eight pay bands within the organization. These pay bands are gauges for financial incentives within the organization, which are attributed to various individuals on the basis of the National Health Service Job Evaluation Scheme.

This job evaluation scheme begins with collaboration between the Department of Health and various representative unions. The two parties endeavor to work together to ensure that the job evaluation scheme is equitable to both the company and its employees.

At first, employees will be asked to complete a job analysis questionnaire that gives consideration to certain specific job-profiling factors (Department of Health, 2003). These factors have been pre-decided within the job evaluation scheme along with the questionnaire that will assess them. The job factors which are profiled include the following:

- Interaction Skills
- Experience, Expertise and Education Received
- Investigative and Reasoning Skills
- Preparatory and Managerial Skills
- Physical Skills
- Accountability for Patient Care
- Accountability for Strategy and Service Developmental Implementation
- Accountability for Monetary and Physical Resources
- Accountability for Human Resource Management
- Accountability for Research and Development
- Liberty to take Action
- Physical Effort
- Mental Effort
- Emotional Effort
- Working Environment

Once the questionnaire has been completed, it is then assessed by a job evaluation committee, which creates a job profile for the post in question based on the answers given in the questionnaire. This job profile may be further altered according to the requirements of the staff where it is being implemented. The creation of the job profile can follow nationally established guidelines along with changes that may be made locally to the job framework.

Aside from the factors that were considered above, there are also other factors which are taken into consideration in the questionnaire. These factors are directly related to the working conditions within the post in question. These factors can range from level 1 to level 5. Level 1 gives consideration to occasional exposure to unpleasant or dangerous working conditions, while level 5 gives consideration to frequent exposure to such hazardous working conditions.

The completion of the initial profile allows it to be considered by various agencies and parties until changes can be implemented, which give it more recognizable features of the post in question. Thus, the creation of the job posting is a combination of organizational, personal and specific job descriptions (Savage, 2004).

2.15 Critical Article Analysis

2.15.1 Job evaluation for clinical nursing by implementing the NHS JE system

This study focuses on evaluating all the clinical nursing jobs that implement the NHS job evaluation system in four hospitals. The aspects of job evaluation are used by many organizations and job evaluation is considered as systematic procedures that are actually designed to know the relative worth of a job. It is a measurement between the worth of the job and wages (Kahya and Oral, 2007). Different organizations of the world have adopted this phenomenon, and the ultimate role of job evaluation is salary administration. The National Health System was developed in UK and initiated by the Department of Health. In the healthcare

system, this job evaluation system is considered as a significant change in the last few years. A number of 13 national nursing jobs in the nursing service arena are associated with NHS JE system. The common jobs in the nursing circle like nurse specialists, nurse team leader, and nurse team manager among others are evaluated through this system. This system strengthens up the human resource system of an organization and this NHS system strengthens up the HR systems of hospitals.

The NHS JE is considered as one of the most viable changes in the nursing sector (Kahya and Oral, 2007). This system changes the conventional methods of pays and the career structure, payment scales and the condition of employment. There are about 16 factors on which the NHS JE system evaluates. These factors are classified into five groups which are skills, responsibility, freedom to act, responsibility, effort and the working conditions. Different factors are allocated to these groups. Besides that, certain weights are also allocated to these groups which are 48 percent, 42 percent, 7.5 percent, and 2.5 percent. In this system, there are certain job scores that are calculated and they range from 340-385 points for the nursing job. Furthermore, there are certain bands that are linked to the points and the range of these points and band are given below:

Band 1= 0-160 points

Band 2=161-215 points

Band 3=216-270 points

*There are 9 bands. Only 3 are discussed here.

Strategists suggest that the element of job evaluation can be conducted through two different processes (Kahya and Oral, 2007). These two processes are matching and local evaluation. Similarly, these two processes are further divided as the matching process involves

three stages. The first one is the 44-page questionnaire of job analysis, seeking the assistance from the line manager and reviewing the questionnaire.

The NHS system has been reviewed extensively by different experts and is accepted in different parts of the world. However, it has also been agreed upon by different analysts that this system is fit for the purpose. The second edition of this system was published in the year 2004.

A total of 13 job titles are used in the nursing services and these service categories are linked with the meaning to staff in terms of career development and are associated with the nursing profession. The ultimate aim of this study is to score all the nursing jobs in the study hospitals (Kahya and Oral, 2007). Therefore, it can be said that the NHS system is appropriate. This case study was developed in four hospitals and the procedure includes: 1) selecting the job category; 2) gaining the information using the job analysis; 3) evaluating and the scoring the jobs; and 4) comparing the job scores. Similarly, the participants who took part in this project are nurses and their supervisor who belong to regional and local hospitals. Among the entire population, 158 nurses were sampled in this research. A questionnaire was used to collect the data, and the questionnaire was designed with the factor headings of NHS. However, the response rate of the questionnaire was 79.11 percent, and certain questionnaires were cancelled because of contradictory comments (Kahya and Oral, 2007).

In order to attain the results, the questionnaires were analyzed through different factors and preference was given to a particular given factor. The differences of views were resolved through the superior nurses. When proper consensus level was achieved, an appropriate level was applied to every relevant factor. The results were repeatedly checked for consistency, and against NHS and other relevant jobs. However, disagreements in the study were quite rare and all the evaluation processes took a total of three months to complete (Kahya and Oral, 2007). The

results were calculated for all the fields related to the nursing profession, and the results for nurse team leader and nurse team manager were calculated through this approach.

This research analyzed around 94 jobs in the clinic categories and these categories are placed in four hospitals that are located outside the UK. This can also be concluded that pay bands are quite different within the different jobs of the nurses. However, it is also evaluated that it is not difficult to match the jobs of clinical nursing in a healthcare organization. It has also been evaluated that NHS JE systems have certain flaws such as the weights being improperly devised such that the results achieved are not accurate. Some aspects are given more weight age and this causes difficulty in evaluating. Similarly, the responsibilities of the staff management would focus on two dimensions and these dimensions are: 1) the number of staff to be managed and 2) the depth of professional knowledge. However, the NHS JE does not include the variations that are present in staff management (Kahya and Oral, 2007).

Thus, in a nutshell, it can be said that NHS JE is considered as the most appropriate and robust system available in the recent years, besides its faults and repercussions. The benefits of NHS are wide and varied and they supersede the flaws. This is the reason why it is regarded as the one of the best and most viable job evaluation system over the years (Kahya and Oral, 2007). Although the flaws are a major concern of NHS JE, analysts and strategists believe that the issues attached to NHS JE would be resolved after some years.

2.15.2 Job and Work Evaluation

Job evaluation systems are considered to be an important system in every organization, and the human resource department usually puts great emphasis on job evaluation system. However, they are more common in the private sector and have come under serious attack in the public sector. In the public sector, the criticisms are ranging from favoritism to organizational

politics (Heneman, 2003). The ultimate purpose of this review is to help the human resource professionals of the public sector and train them to avoid using job evaluation systems for compensation purposes. The collected literature review is more on work evaluation, a concept which is broader than job evaluation. It incorporates different aspects in an organization's setup such as the evaluation of competencies, roles, and work. However, it is believed that the current techniques that are associated with job evaluation should be changed and must be aligned with the changing nature of the work (Heneman, 2003). It can be said that job evaluation techniques must be aligned with the work evaluation techniques so that the organizations, especially those in the public sector, will benefit in both the short and the long run.

The methods that are associated with job evaluation are quite common, such as classification, while the less known methods are market pricing, and so on. However, there are two approaches that are involved in the work evaluation method: single and multiple standards for work evaluation (Heneman, 2003). The single standards are in comparison with marketing pricing, banding, and ranking, as far as other jobs are concerned. Similarly, the written standards that are associated with it are classification and single-factor plans. In the same way as multiple approaches, the comparisons for other jobs are factor comparisons, and point factor system and competencies for written standards. These phenomena are discussed in the paragraphs below. Ranking is considered as the most straightforward method used in work evaluation. In this phenomenon, jobs, teams, and individuals are ranked on the basis of different factors. In this approach, each entity is compared with the other entity, and the basis of comparison is the value to the organization. The advantages of this approach are that it requires less time, it is simple to use, and requires minimum amount of administration (Heneman, 2003). However, the disadvantages of this approach are that the criteria for evaluation is not understood, the ranking

between the evaluators are not comparable with each other, there is a huge possibility of biasness, and inequity may enter the system.

The market pricing system stresses on the external markets which include jobs, teams, and groups, which are factors compared with internal aspects. However, careful measures must be taken in order to make sure that jobs are comparable with each other. The advantages of this approach are its quick procedures in the job market, the market facing validity of employees, and market data being available in abundance (Heneman, 2003). Similarly, the disadvantages of this approach are measurement and sampling errors, the difficulty in locating market data, and possible discriminatory practices.

Another system that is widely used in the job evaluation is banding and it takes place when the jobs are grouped together and certain bands are formed. These groups are arranged in ranks and are placed in different bands. The advantages of this approach are that it is easy to produce, it allows the organization to be flexible, and minimum administration is required in it. However, the disadvantages of this method are that differences among groups can be ignored and it may invite different inequity perceptions (Heneman, 2003). The classification method defines the value of the people and the work with the written standards. The factors are classified in this process and evaluation is done on the basis of classification. The advantages of this method are its easy formation of structure, the explicit values designed in this process, among others. However, the disadvantages of this approach are that it creates hierarchies within organizations and it requires extensive amount of administration. Besides those, there are certain other systems such as point factor system, factor comparisons, competencies, and so on.

There are certain major perspectives that are involved in this research which are critically developed to conduct the entire research and frame its literature. These major perspectives are

traditionalists, realists, strategists, market advocates, social reality perspective, the development of organization, competencies, and so on (Heneman, 2003). However, the work evaluation factors are closely related to certain aspects: evaluator characteristics, evaluate characteristics, environmental conditions, organizational conditions, and work evaluation outcomes. Similarly, the work evaluation process relates the work with work analysis, and work description with work evaluation and hierarchy of work.

Therefore, it can be concluded that there has not been enough research on this aspect of work evaluation but in the current scenario of the rising trends of human resource management organizations stressing on work evaluation and job evaluation. In this way, the job of an individual can be easily analyzed. Therefore, it can be said that work evaluation is not static, but is an ongoing process. Work evaluation can be a viable source of competitive advantage for the organization in both the short and the long run (Heneman, 2003). The stress is on the phenomenon that jobs still exist in the market place and people are willing to do these jobs. Numerous processes are involved in job evaluation, and power influences the decision of organizations. However, there are many evaluation systems, most of which are not evaluated, creating a gap between the employer and the employee. However, it can be said that job evaluations and work evaluation techniques are quite viable in both the short and the long run.

2.15.3 First Steps of the Journey: Job Evaluation for Agenda for Change

First Steps of the Journey: Job Evaluation for Agenda for Change by Angela Watts and Simon Green was the next article to be analyzed in the context of this study. The article was published in 2004 in volume 10 of the *Nursing Management Journal*. According to the authors, job evaluation is a primary concern for trusts. The authors believed that if pay modernization was to be effectively introduced, it would have to rest heavily on job evaluation systems. The article

began by providing a basic insight into job evaluation, and proceeded by introducing the NHS (Watts and Green, 2004). However, it was observed that the authors chose to subject the NHS to a critical perspective since they expressed that the NHS Job Evaluation System was still in a testing phase and it would be too early to consider it an outright success.

The authors were of the opinion that the NHS Job Evaluation was based on the degree of validity of the knowledge, skills, and experiences that a person held. The authors further elaborated that in consideration of the fact that these three categories were far too broad to perform an effective job evaluation, they had been broken down further into a total of 16 factors that were considered at the time of the job evaluation. It was established that each job is evaluated and is assigned a quantitative measure that is then used to judge the exact remuneration that a person holding the job should receive (Watts and Green, 2004). Generally, the quantitative measure assigned is based on the analysis of the 16 factors with respect to the job as it is positioned alongside its supplementing job.

The article was quite different from other articles analyzed in the study as the authors chose to shed light on the actual processes that were undertaken by the evaluators in carrying out job evaluation. It was established that matching and local evaluations are two techniques used by job evaluators. In a brief elaboration on the two job evaluation techniques, it was presented that in cases where the specifications, responsibilities, and requirements of a job match that of another job, the pay scale of the job under consideration is matched with the pay scale of the job to which it is similar (Watts and Green, 2004). In the case where the pay of the job under consideration is not similar to any other job to which it can be matched, then the job is evaluated locally.

The authors highlighted the fact that matching is used more often than it is credited in job evaluation. They highlighted that although it would be pointless to ignore the fact that the debate for the determination of the authenticity of matching is still ongoing, it can be agreed upon that in cases such as those of nurses working on the same level with the same degree of utilization of knowledge, skills, and responsibility with only a minor difference in tasks assigned, there is hardly any room left to doubt the authenticity of matching as an evaluation technique (Watts and Green, 2004). Matching, according to the authors, is brought about effectively through the establishment of core job descriptions that can then be used to acquire an understanding of numerous jobs in a hospital or a medical institute in order to establish characteristics that may allow matching. However, as the authors point out, matching is not a process that is as easy as it may appear to be on paper. It is in essence a highly volatile process since it calls for the extensive judgment of jobs, and it is therefore essential that it is performed by professionals who are not only qualified in the process of matching but are also aware of the intricacies of the jobs they are evaluating.

Further, the article sheds light on local evaluation and describes the three-stage process that local evaluation incorporates. The first stage, as the article elaborates, is the filling out of a job analysis questionnaire by the person holding the position. The authors are careful to mention the fact that the job analysis questionnaire is designed to be incredibly in-depth and seeks to bring to light as many attributes of the position holder's position as possible. The authors highlight the fact that it is common for job evaluation questionnaires to span lengths of over 40 pages at times. Once the questionnaire has been filled out, it is submitted to highly trained job analysts who review the questionnaire (Watts and Green, 2004). The analysts also check the filled out questionnaire for contradicting answers, clear responses, and concise replies to

mandatory questions. Once the analysts have ensured that the filled out questionnaire is ready for evaluation, it is forwarded to a panel of that is constituted primarily of two members of the staff and two members of the management of the institute/organization/hospital that the subject employee is working in. The questionnaire responses are then evaluated in light of the 16 factors to determine the exact value of the job to the institute/organization/hospital.

It is essential to realize that this article makes extensive use of secondary data and while it presents the findings in exquisite detail, the absence of primary data puts the research performed in the article in a position where the credibility of the findings of the article suffer significantly (Watts and Green, 2004). This can be concurred on the basis of the fact that the larger share of articles that were considered for evaluation for the purpose of this paper included primary data and the analysis of that data in a manner that was nothing less than in depth. In light of this fact, while the article is highly detailed and presents credible elaborations, the findings of this particular article can only be considered as a minor contribution to the research into job evaluation in NHS.

The authors bring the article to a conclusion with recommendations for the matching process and the evaluation process. The matching process is one that requires extensive incorporation of enhanced levels of flexibility, and the evaluation process has become far too complex and time consuming in attempts to make it as accurate as possible (Watts and Green, 2004). The authors end with an optimistic note on the NHS Job Evaluation System, stating that errors such as those of the NHS Job Evaluation System can be trusted to be ones of only minor significance and should evolve out of the system as time passes and modifications and amendments are brought about.

2.15.4 A Revision of a Job Evaluation System

The next article on the list to be evaluated was a revision of a job evaluation system by Emin Kahya, the Associate Professor in the Department of Industrial Engineering of the Eskisehir Osmangazi University. The article was published in 2006 in the *Journal of Advanced Nursing*. The researcher sought to determine the exact effectiveness of the NHS in the UK by applying the same within the perimeters of four Turkish hospitals (Kahya, 2006). The research was conducted in consideration of the context that modern day job evaluation is a relatively new area of professional development in the UK, and a large number of the related studies performed have chosen to direct their attention to the actual implementation of the system. The author was of the opinion that it is just as imperative to consider the authenticity of the constituents of the NHS in light of the fact that the implementation of an effective, efficient, and productive NHS was next to impossible unless the constituents of the same were clearly established, defined, and prioritized. The research singled out five key areas that were of primary concern to the analysis performed in the research: knowledge, education, experience, environmental conditions, and hazards.

According to Kahya (2006), as most studies have focused on the implementation of the whole system in a health organization and not on the proficiency of the system in terms of factors and their level definitions, a job evaluation system was developed in the United Kingdom in 2003-2004.

The primary data in this research was accumulated by making use of the implementation of a survey questionnaire. As mentioned earlier, a total of four hospitals were incorporated into the research, and the survey questionnaires implemented on the personnel of the four hospitals were ones that were designed to test the degree of significance of a total of 19 variables. The

primary participants for the survey were nurses and clinics (Kahya, 2006). The primary data was extracted from around 90 participants, out of which the larger number was that of nurses and the smaller number was that of clinics.

It is essential to highlight that the purpose of this research, unlike other certain researches discussed in this paper, was not to determine possible errors that were being ignored or overseen in the implementation of the NHS but to identify possible areas and methods for improvement.

The research initiated by highlighting the fact that recent economic trends had put hospitals and medical institutions into a position where they have no other option but to bring about transformations in their human resource infrastructure. Generally, these transformations have incorporated the heavy remodeling of the human resource infrastructure in an attempt to cut back on costs. The research highlights the fact that other medical institutions and hospitals have countered the same scenario by incorporating a heavy degree of performance-based remuneration in their human resource infrastructure (Kahya, 2006). This functions primarily by remunerating employees on the basis of the targets that they manage to achieve. The research further sheds light on the fact that this modernization of human resource systems is often brought about by either allotting the employee with a fixed pay while linking it to a job evaluation score for which the employee is periodically tested, or a scenario where the employee's pay is considered for continuous revision with regard to performance scores.

The research diverted a considerable degree of attention to the fact that a large number of hospitals and medical institutions chose to adopt the point-based job evaluation system. According to the author, the point-based system, when implemented on white collar positions, was based heavily on skill-oriented, responsibility-oriented, effort-oriented, and working-condition-oriented factors. Skill-oriented factors included those such as knowledge, education,

problem-solving, experience, decision making, language, complexity, communication, and software knowledge (Kahya, 2006). Responsibility-oriented factors were established to be inclusive of financial and physical resources, delegation, and HRM. Effort-oriented factors included emotional, mental, and physical factors, whereas working-condition-oriented factors included hazards posed by environmental conditions.

The author was of the opinion that it had been after World War II that these factors had come to light, highlighting that half the employees in the United States were affected by wage rates based on job evaluation. The author presented that the modern day NHS Job Evaluation System had come forth in 2003 and had been subjected to a revision in 2004, both of which were of a nature so profound that the NHS had never been revamped so directly in the last 50 years of its history.

When the research was practically conducted by putting the survey questionnaires into implementation, the achieved response rate was around 60 percent (Kahya, 2006). It is, however, highly imperative to highlight at this point that almost all of the survey participants were women and had an average length of nursing experience that spanned around 10 years if surgical and intensive care unit nurses were to be considered together. The research made use of the T-test to carry out statistical analysis, and made use of a statistical hypothesis in the same regard. When the survey findings were accumulated, it was observed that a significant degree of difference was going unnoticed. This difference was amongst the clinic categories if nursing tasks were to be considered.

It was concluded in the research that while current NHS practices may be providing a stable degree of effectiveness and efficiency, there was still need for more personnel. The research therefore suggested that two new positions should be generated in the NHS system.

These new positions were ones that belonged to the emergency unit, and the intensive care unit (Kahya, 2006).

On a more specific level, the research concluded that it would be unwise to generalize wage rates for nurses since every specific nursing position in a hospital entailed a unique set of characteristics. These characteristics spanned across not only the nurses responsibilities but also across financial and physical resources, as well as information resources (Kahya, 2006). The research attempted to bring to light that while the NHS Job Evaluation System was a system unlike no other in terms of its effectiveness and efficiency, there is still significant room for improvement with regard to the number of jobs developed and implemented in order to carry out the large number of clinical supervisor nursing jobs.

2.15.5 An Analysis of Job Evaluation Committee and Job Holder Gendered Effects on Job Evaluation

An Analysis of Job Evaluation Committee and Job Holder Gendered Effects on Job Evaluation was the article selected for discussion, analysis, and evaluation. The research had been conducted by Chad T. Lewis and Cynthia Kay Stevens in 1990 and was from Volume 19 of *Public Personnel Management*. The research was based heavily on primary data analysis to develop a case and made use of previous research studies in the form of secondary data to strengthen the claims and findings of the research.

The rationale of the research was based on the fact that remuneration trends in regions such as Great Britain and Australia had taken on a rather uniform outlook, and the research appeared to be motivated by the presence of the trend in the public sector. The authors initiated the research by presenting fundamental definitions of the key constituents of the research. The primary key constituent in this regard was that of the very definition of job evaluation

methodology itself. The authors continued by stressing on the differences between the ideological perception of job evaluation and the practical form of the concept (Lewis and Stevens, 1990). It was their perception that job evaluation, when put unto its practical form, incorporated a heavy degree of biasness, and it was for the same reason that they chose to highlight the causes of the development of biasness in job evaluation.

They were in agreement with the previous research studies such as those that chose to single out the reasons for the generation and development of biasness in job evaluation scenarios. One such research was of a nature such that it presented four potential causes that could be attributed as the causes of the development of biasness in a job evaluation scenario. The first was that of the dimensions selected to be performed in the job evaluation. The second was that of the degree of significance that each dimension was attributed with (Lewis and Stevens, 1990). The third was the actual application and implementation of the specific system designed to carry out job evaluation in the organization. The fourth was that of the procedures brought into use to determine the salaries of the employees. The article seconded the motion that each one of these steps is vulnerable to the development of biasness, and as a result of this vulnerability, the very practice of job evaluation can be expected to suffer.

The research also sought to employ the Z-test in an attempt to incorporate statistical accuracy into the research, but it became highly implausible when the research findings were accumulated and was therefore limited in its application in the research. The research methodology was one that was based on a sample size of over 200 participants. Considering the nature of the subject of the research, the research methodology implementation participants were ones who were primarily students of business studies. The participants were either from the

University of Washington or from Everett Community College (Lewis and Stevens, 1990). The research proceeded by presenting the participants an orientation on the Willis Position Job Evaluation System, after which the participants were divided into segments and were provided with a job evaluation task of an external person. The gender details of the external person were not provided to the participants and once the participants had spent a considerable amount of time analyzing the subject and the professional position of the person with respect to the person's job, they were asked to guess whether the subject they were analyzing was a male or a female.

The research continued to employ the Z-test and it was established that a total of three factors of Willis Position Evaluation System would be brought into use in the research. These three factors were job accountability, knowledge and skills, and mental demand. Job accountability in this regard was considered as the actual parameters that a job entailed with respect to the freedom that the position gave to the subject to take action. In this area, job accountability also gave regard to the financial implications that the decisions made by the position entailed (Lewis and Stevens, 1990). The factor of knowledge and skills was based on the blend of managerial capabilities that the subject had and required in order to effectively carry out the functions and operations of the position in which the subject was placed. The third factor of mental demand was the degree of authority that a position entailed with regard to the extent of independent judgment that the holder of the position could exercise in order to carry out problem-solving operations. It was established that these three factors were such that they could be considered as compensable.

It is at this point in the research that one cannot help but feel that by focusing centrally on gender-based biasness in job evaluation, the authors have left out a significant number of variables that have even more profound implication on job evaluation than gender biasness. The

very methodology of the research appears to be one that is designed to centrally address gender biasness trends in job evaluation. While the research took off with an appreciable note by shedding light on the numerous intricacies of job evaluation, it appears to have narrowed down the scope of its analysis far too much than a research on the subject of job evaluation merits.

Also, the selection of the sample size has been limited to only two institutes, whereby the limitation of gender biasness amongst the research participants can be expected to increase (Lewis and Stevens, 1990). This is primarily because of the fact that by taking participants from only two institutions, the research has limited itself to the observation of only two sources: forms and natures of gender biasness. If a generalized understanding of gender biasness in job evolution was to be sincerely developed, a more reliable approach would have been to acquire participants from as varied institutes as possible, even if the sample size was maintained at the same limit.

Another customization that was performed in the research was that of the elimination of the extreme values observed in the charts. It is essential to note at this point that observations were collected from the participants in a highly organized manner. Once the participants had been given the orientation had been divided into segments, they were only approached once a significant amount of time had passed to allow them to consider the task that had been assigned to them (Lewis and Stevens, 1990). However, even though the extreme values were not incorporated into the study, the incorporation of two independent Seattle City Personnel Analysts serves to add a considerable degree of authenticity to the research findings.

The research concluded with the results that gender biasness did, indeed, have significant implications in the area of job evaluation. However, in consideration of the three compensable factors that the research had brought into consideration at the time of the implementation of the

research methodology, it was observed that the most profound of implications were in the areas of the knowledge and skills required for the job, as well as the mental demands that the position entails. It was concluded that job accountability has the lowest level of significance in the case where Willis Position Job Evaluation System is concerned (Lewis and Stevens, 1990). As the research came to a conclusion, it was fair in highlighting the vulnerabilities to which it had been exposed as a result of the chosen and implemented research methodology, but claimed all the same that the trends uncovered by the research were ones that previous research studies had failed to do effectively.

2.15.6 Designing a Comparable Worth Based Job Evaluation System: Failure of an a Priori Approach

Designing a comparable worth based job evaluation system: Failure of and a priori approach was published in volume 19 of the *Public Personnel Management Journal*. The article initiates by bringing to light the latest trends in public sector job evaluation practices. According to the authors, the renewed concern in this regard is one that has been brought forth due to concerns in the area of pay equity. The authors however seem to be established in their opinion about the presence of gender bias in job evaluation practices as they highlight the essential reasons because of which job evaluation and pay equity are given supplementing significance (Tompkins, Brown and McEwen, 1990). For its foundations, the research relied heavily on a study by the National Academy of Sciences. The research highlighted the fact that it was essential to realize that modern day employers choose to employ varying job evaluation procedures to different job categories. This practice makes it increasingly difficult and complex to ensure that pay equity principles are followed. The second attribute in this case that the research highlights is that the frame of reference established and used in the purpose of job

evaluation by modern day employers is one that is designed to reflect upon market-based wage rates. According to the research, this aspect has significant implications on the authenticity of the outcomes of the job evaluation.

The research proceeded by giving special attention to the Montana Project and by doing so shed light on the point based job evaluation system. According to the research, the point-based evaluation is one that is extremely time consuming and requires further modifications in order for it to be implemented in a manner such that the desired degree of effectiveness can be achieved (Tompkins, Brown and McEwen, 1990).

The authors gave special consideration to the methods that were employed in the selection of factors used to perform point-based job evaluations and the attribution of weights to the same. The research highlighted a developmental process which incorporated the selection of an advisory council, the establishment and elaboration of benchmark jobs as a frame of reference, the selection of tentative compensable factors, the establishment of a standard for the assessment of the authenticity of the factors established, and the weights assigned to each factor, as well as the validation of job factors.

The article was based heavily on the development process that was employed in the case of the latest attempt by the State of Montana to establish and implement an effective Job Evaluation System. In doing so, the article in essence advocated for the need of a policy-based approach in job evaluation in order to ensure pay equity (Tompkins, Brown and McEwen, 1990). In this regard, the authors argue that the implementation of a job evaluation system based on a policy-capturing approach can be trusted to deliver a job evaluation-based wage structure that is compatible with an organization's present hierarchy.

The article was quite limited in its scope because of the absence of any primary data, and this particular implication was observed to be most clear in the conclusion where the article was only able to present a summary of sorts of the research findings (Tompkins, Brown and McEwen, 1990). The article addressed the central issues of this research but was quite narrow in its approach, and it is for the same reason that the scope of the article was limited to only a retrospective analysis of sorts.

2.17 Summary

It is desirable for healthcare organizations today to establish a system which is not only economically viable but draws in and retains its employees. One of the methods by which it can accomplish this task is by the use of human resource management. Human Resource Planning is the prediction of the traffic of individuals who may enter and leave an organization and how best to use these individuals as resources in order for the company to achieve its ends. The management of human resources is a relatively new field and its application in healthcare involves its own opportunities and challenges. The main purpose is to satisfy the demands for human resources and nullify any inconsistencies. In order to accomplish this task, HRM uses methods known as job analysis and job evaluation. Job analysis is the process of systematically obtaining information about jobs by determining what the duties, tasks, and responsibilities of those jobs are in the context of a specific job. Job evaluation is a systemic process for defining the relative worth of jobs within an organization. The uses of different schemes in job evaluation are essential to establishing pay equity within an organization.

Due to companies not meeting equality of pay within its organizations, the UK parliament has proposed several legislations into law which provide for the equality in public and private sectors for women, various ethnicities, and disabled individuals. The first major act

toward this cause was the Equal Pay Act of 1970. Although these laws have existed for years, their enforcement in public and private organizations has left much to be desired. Pay equity within organizations is essential to maintaining quality of care and worker satisfaction.

One such healthcare organization which employs these methods is the United Kingdom's National Health Service. It is currently the world's largest publicly-funded health service under the department of health, and operates upon the ideal of free universal healthcare open to 60 million residents of the United Kingdom. Though the National Health Service was originally established as a free universal healthcare system, it has since been systematically started becoming more and more privatized and has dismantled various health services.

Chapter 3: Research Methodology

3.1 Introduction

Research methodology is basically a portmanteau. It is the correlation of the two that makes up a significant part of the most important field of scientific research and technology (Kumar, 2005). Research is the quest for knowledge, to weigh, evaluate and observe facts in order to explain opaque proceedings (Kothari, 2005). It is the systematic investigative delving into an unknown scientific process, whereas methodology is the system of methods followed in a particular discipline. Methodology includes a collection of theories, concepts, ideas, and ideologies as they relate to a particular discipline or field of inquiry (Yin, 2003).

To put it simply, the two linked together come to mean inquiry of facts within a particular field using a particular method suited to that field. In layman's terms, research is the surgeon about to perform a surgery and the methodology is the tool (Adèr and Mellenbergh, 1999). To clarify further, one cannot delve into the realms of a particular field unless he or she applies the correct tool. After all, one can hardly use surgical instruments for cooking (Detterman, 1985). In the same way, a specific methodology must be applied to a particular field of inquiry.

3.2 Adopted Research Methodology

The organization which is the focus of the adopted research methodology is the National Health Services. The National Health Service has been taken and analyzed in order to determine whether public health services are implementing job evaluation in a manner such that it is abiding by the basic principles of pay equity. The research methodology that has been adopted to determine whether or not pay equity serves to improve work conditions is one of a qualitative analysis approach.

3.3 Secondary Source: Article Analysis

The secondary source for this paper is one that makes use of a specific number of articles to perform a qualitative analysis. The articles have been selected on the basis of specific criteria which have been discussed under a separate heading in the paper. Each article has been analysed individually and the findings extracted from the articles have then been put together to form a definite derivative conclusion of sorts.

3.4 Qualitative Analysis

As mentioned above, the research methodology for the paper is one that has been designed to follow a qualitative analysis. The qualitative analysis allows for an in-depth understanding of the research subject to be acquired. The qualitative analysis is generally used in situations where the subject of research at hand is one that incorporates a significant degree of study of behavioral attributes or the study of trends that cannot be expressed using quantitative figures.

In order to carry out this qualitative analysis effectively, the literature review was brought into use. The literature review, unlike the literature review that rudimentary studies incorporate, was a critical literature review and served to present a critical analysis of the selected articles. Each article was critically analyzed whereby the discussion presented on each article was not limited to a description or summary of its contents.

In order to conduct a research based on qualitative analysis, it is essential to analyze the documentation related to the subject under observation. More than often, peer-reviewed publications are analyzed in an attempt to develop a clear understand of the trends and tendencies that exist in the subject being analyzed (McNabb, 2004).

3.5 Performance of the Qualitative Analysis

The qualitative analysis in this research study has been performed in a two-step process. The very first step is that of the execution of the critical literature review. Once the articles mentioned had been analyzed and evaluated for their reviews and their findings, the critical literature review chapter came to a close. The second step was then carried out in the findings chapter, where the essential findings from the critical literature review were subjected to a critical appraisal. It is in the same chapter that the findings of the critical literature review shall be discussed.

3.6 Search Strategy

The search strategy was one that was based on the singling out of particular articles that could be expected to contribute to this research. A particular criterion was developed and followed to carry out an organized and comprehensive search strategy. This was done in order to ensure that the articles incorporated into the research were credible and could be trusted to provide the research with a sufficient understanding of the subject of the research study. It is for the same reasons that the number of articles to incorporate in this research study was limited to a maximum of six articles.

3.7 Criteria for the Selection of Articles for the Critical Literature Review

The articles selected for the literature review were based on specific criteria. The first essential requirement was that the articles had to be related to job evaluation at all costs. The second prerequisite was that the articles could not be mere discussions on job evaluation, preferably attempting to provide the research with critical findings so as to allow this research to expand the horizon. It is essential to highlight at this point that special consideration and preference was given to articles that were related to NHS job evaluation in particular.

3.8 Justification for the use of the Qualitative Approach

The qualitative approach has been employed in this research study because of the fact that there are hardly any elements of this research that can be considered to be of a nature that could be subjected to statistical comparison and/or calculation. Much of the study regarding the NHS job evaluation is one that has been performed through the use of peer-reviewed publications, and since job evaluation in itself is a process that is highly qualitative procedure in excesses, it would have only served to decrease the credibility, authenticity, and reliability of the research and its findings had a quantitative approach been followed.

A qualitative analysis generally proceeds by analyzing the cause and effect relationships that exist in a naturally existing setting. The researcher delves into the numerous variables pertaining to the scenario, and attempts to acquire an understanding of the scenario that is often argued to be non-generalizable. This is because of the fact that in the case of the application of a qualitative analysis, the research has to be anchored to a specific context and has to operate within the perimeters of that context. Generally, qualitative data once accumulated through secondary sources is subjected to extensive analysis in an attempt to confirm or disclaim pre-existing perceptions regarding the research subject.

It is essential to understand that while the argument between the legitimacy of qualitative and quantitative analysis is one that holds credibility and the result of which may serve to revolutionize the way modern day research is carried out, the present scenario merits that the approach most suitable to the subject of research is selected and implemented. This is because of the fact that both research approaches have specific attributes and while each research approach may differ from the other in a number of ways, they are both meant to facilitate the effective execution of the research.

3.9 Critical Appraisal Skills Program (CASP)

This is an assessment tool which has been created to aid those individuals who are unfamiliar with qualitative research and its theoretical perspectives. This tool is used to identify within research studies the various theories and assumptions which characterize qualitative research.

In order to accomplish this task, the program employs the use of ten questions which are used to broach four issues which may be addressed in studies using qualitative research. These issues consist of rigor which contends whether a thorough approach has been applied to the study. Another issue which is given consideration is the key research methods within the study and whether the findings from these methods employ any form of credibility. Finally, the relevance of the findings of the study at an individual and at an organizational level is considered within the program.

The first two questions within the appraisal tool are screening questions which are used to ascertain whether the study in question does employ qualitative theories in its research. The first question considers what the study aims to accomplish. The second question gives consideration to whether qualitative research should be employed in this study.

Answering these two questions leads to a more detailed assessment of the study in question by asking if the researcher has given justification for the research design employed. This is followed by another which asks how the participants of the survey were chosen, how the most appropriate participants can be chosen to maximize the pertinent knowledge required in this case, and why certain participants may be reluctant to take part in the survey.

This is followed by a question regarding the collection of data which asks whether the research data collection is justified. The collection of this data is further explored by asking the methods of collection of data, the form of data collected, the methodology of data collection, and the saturation of data.

Following this the reflexivity of the data is explored which gives consideration to the relationship between the researcher and the participants of the study. This question explores the inherent personal bias of the researcher, as well as how the questions were made and data was collected. There is also consideration given to how the researcher has responded to any changes within the research design. This is followed by an exploration of the ethical design of the study which discusses issues of ethical standards within the study, as well as those related to the participants, such as informed consent and confidentiality. The question also asks if the researcher sought approval from the board of ethics before publishing his study.

This is followed by data analysis which asks if the data analysis process has been described in sufficient detail and whether the data has been categorized into themes. This is followed by other considerations such as whether there is sufficient data to provide an analysis and thus the findings, and whether there is any contradictory data taken into account. It ends with examining the potential bias of the researcher in assessing the data taking for analysis.

The second question considers the findings of the study and the various components of it and questions whether it encompasses both sides of the argument and has its credibility assessed by the researcher.

The final question asks how the current research conducted can contribute to any future studies or researches. It also considers whether the findings can be transferred or be used to identify new areas of necessary research.

In order to assess the study and references which have been employed in the research, a critical appraisal will be employed to evaluate and address specific areas of the research. In order to differentiate it from the Critical Appraisal Skills Program, it must be taken into consideration that this form of critical appraisal is merely a subjective review of all the researches which have been introduced within the dissertation. It has been designed to present an analysis of the research study in a manner such that the key components of the research can be evaluated with respect to the primary essentials that a credible research should constitute. The critical appraisal has been designed to address areas such as the primary center of attention that the research focused upon, the possibility of critical research studies that the research may have missed out on, the criteria that were established and used to select articles and other publications for review in the research study, analyze whether or not the studies incorporated into the research study were adequate enough to address the questions at hand, and give an overview of whether or not the results observed held a pattern of similarity and the manner in which the results were presented. Additionally, the critical appraisal also evaluates whether said researches may provide a viable result for the research questions considered and how they relate to the conclusion. Furthermore, the appraisal will provide a systemic review of the information provided in each study.

3.10 Limitations of the Research

The quest for unsystematic and undefined knowledge comes with its own set of limitations. It may walk toward unfamiliar paths, but it has its own share of obstacles as well. The present study succumbs to a number of obstacles due to reasons that largely affect the progress of this research (Goddard and Melville, 2004). Strenuous efforts have been made on the part of various research analysts in order to maximize the degree of authenticity, accuracy, and

correctness of the report, but to no avail; the reason for this is that the limitations of the research are not subject to the lack of effort but to the lack of external factors. These factors are clarified below (Walden, 2006). The obstacles mainly include geographical, financial and time hurdles. The top most reason that lends support to the numerous obstacles lies largely on the fact that the resources are scarce. There are insufficient resources available to researchers in order to complete the task at hand.

3.10.1 Limitation of the Qualitative Approach

While the qualitative approach may appear to be effective with regard to the current research, it would be a mistake to carry out the qualitative research without considering its limitations. It is essential to realize that while qualitative research allows the enhanced study of behaviors, opinions, preference trends and similar elements, the accuracy of the findings obtained through a qualitative analysis is far from that which is derived from the implementation of a quantitative analysis. This is because of the fact that while the results obtained from a quantitative analysis have a definite appeal to them, the results obtained through a qualitative analysis incorporate limitations more often.

3.10.2 Limitations of the CASP

The limitations of the Critical Appraisal Skills Program are inherent upon the personal bias of the person using it. The personal bias of the user can lead to inaccuracies in which the data within the studies is represented, leading to an inaccurate portrayal of the critical appraisal of such data. Additionally, the standards which are attributed to the quality of information, ethical standards, findings, analysis and other considerations do not have a base value within the appraisal. This leads to the users forming their own opinion regarding various factors which are being employed in this study. Another limitation which is present within this assessment tool lies

within the contention that this program does not encompass all the theories associated with qualitative studies. The possible lack of understanding of these theories on the part of the user of this program must also be taken into consideration. The employment of these questions may not lead to the same conclusions as the use of actual qualitative theories, seeing that the interpretation of both formats may be different. The limitations of the critical appraisal are directly related to the personal biases of the individual who fills out the appraisal. It must be considered that the critical appraisal does not provide any standard for studies chosen, nor does it in any way critique the information used within the chapters. Rather, it prominently displays the information used to derive the appropriate results for the research questions.

Chapter 4: Findings & Analysis

4.1 Introduction

The chapter will be used to introduce the secondary research conducted on the National Health Service by way of journal articles, as well as books, newspapers and organizational websites with credible information related to the topic of this dissertation. It will be ensured that all of the material used from these sources has been reviewed by an individual or a group of individuals who have been involved with a study or have performed extensive research within an area which is directly or indirectly related to the main question of this dissertation.

Additionally, a total of six of these articles will be assessed under the critical appraisal skills program. This critical appraisal will be used to determine the relevancy of various issues related to the research and the methodology of its survey techniques.

4.2 Findings from Secondary Research

4.2.1 Research Questions with respect to Critical Review Analysis

The objective of this study is to evaluate the job criteria of people employed in healthcare organizations and thereby enabling the healthcare organizations to determine the levels of implementation on pay equity principles. In order to answer the research questions, an in depth analysis of six articles has been performed and each article, along with the literature review, contributed significantly to the findings.

Judging by the analysis performed, it can be concurred that NHS really performs job evaluations to assist in the pay equity of its hospitals. From articles such as *Designing a Comparable Worth Based Job Evaluation System: Failure of an a Priori Approach* by Jonathan Tompkins, Joyce Brown and John H. McEwen, and *Critical analysis of Job and Work Evaluation* by Robert L. Heneman, it is evident that NHS makes extensive use of job evaluation

in its hospitals and also attempts to incorporate enhanced levels of pay equity through the performance of the same. However, the study also suggests that there is a significant degree of research required into the area in order to make the effective implementation of job evaluation systems in NHS possible because the current setup is not delivering standards that a system of a magnitude of scale in NHS requires.

With regard to the research question that pertains to the tendency of NHS to promote job equity in the projects that it forms under public-private partnership, it can be concurred that NHS tends to exercise measures in order to promote job equity but the measures are far from satisfactory and require improvements in numerous areas of implementation.

The third and slightly more general question that the research addressed was one that pertained to the implications of pay equity on working conditions. Since the NHS was used as an example and numerous research studies were utilized to acquire an understanding of the implications of pay equity on working conditions, it was observed that if effectively implemented, pay equity could actually serve to bring about improvement in work conditions. However, as elaborated in the critical literature review above, articles such as *Designing a Comparable Worth Based Job Evaluation System: Failure of an a Priori Approach* by Jonathan Tompkins, Joyce Brown and John H. McEwen, and *A Critical Analysis of Job Evaluation for Clinical Nursing by implementing the NHS JE System* by Emin Khaya and Nurtel Oral – present the perspective that if pay equity is implemented inappropriately, work conditions will experience negative implications. Derivations such as these were also observed in *First Steps of the Journey: Job Evaluation for Agenda for Change* by Angela Watts and Simon Green.

4.2.2 Findings with respect to the Critical Appraisal Test

From the application of the Critical Appraisal Test, it is acceptable to conclude that the trends in the research subject of this study – the need for extensive research and insight – is still profound. However, this does not imply that the previous research is flawed or useless in any way but it means to suggest the adoption of alternative methods to carry out research in the area of job evaluation and its implications on pay equity. The Critical Appraisal Test also suggests that the research in this area will have to be of certain nature such that it encompasses a significant magnitude of scenarios. This concurrence is based on the fact that the larger share of research on the subject of discussion is qualitative; while qualitative analysis is allowing for a thorough insight to be acquired into the research, there is a significant need to develop research studies that yield to findings which can then be generalized and are not limited in their application to the cases that they take as their foundations for qualitative analysis.

The research performed through the implementation of the Critical Appraisal Test has also shown that while the NHS job evaluation system is one that is unlike any other and has evolved significantly, it is far from a system that can be considered to have pioneered job evaluation in healthcare settings. This is because of the fact that job evaluation techniques being employed require significant degrees of refinement and standardization, in order to allow for a uniform and comprehensive job evaluation, there is a procedure across all NHS facilities where pay equity has to be promoted in the work place.

4.2.3 Job Evaluation with Regard to Nursing

In the job evaluation system of the National Health Service, nurses are employed to only 13 unique positions within the organization. These positions are attributed to each commonly occurring task in a hospital. However, it must be said that the duties of these nurses are variable

in terms of physical exertion, responsibilities, as well as monetary and human resources. It is according to the occupational responsibilities of these nurses that they are assigned points. The increased number of points affords them a higher pay band with the NHS.

A study that was conducted to compare various factors which were present within each nursing service with the standard variables for physical, mental exertion and responsibility, found that the collected results and the standard factors established by the NHS were comparably similar (Khaya and Oral, 2007).

4.2.4 Nurses in the Public Sector

Since the inception of the program in 2001, the National Health Service has endeavored to improve the working conditions of its employees and to meet their expectations in terms of providing proper working environment and job satisfaction. However, despite their efforts and reassurances, the NHS has not implemented any successful plan which includes such promises (Skinner, Saunders and Duckett, 2004). As mentioned before, it has been observed that the pay grade for nurses in the public sector is quite low in terms of the work required of them. This is due to a low outlier which is associated with their profession. The inconceivable matter in considering this is that the nursing profession is by far the one in which individuals are exposed to the most hazardous and unpleasant situations within hospitals (Savage, 2004).

A recent study conducted in 2005 regarding the perception of nurses toward their working environment found that nurses who were associated with the National Health Service experienced higher levels of stress than those who were in the private sector. Additionally, the study also found a correlation between the increased stressors on nurses working in the public sector and low levels of satisfaction with their working environment, as well as negative experiences at work (Working Well Initiative, 2006). Other studies found similar results with 65

percent of nurses who were dissatisfied with their positions and intending to quit. Their main dissatisfaction in this case however was with the promotion and training opportunities rather than workload or pay. Recent policies have been instituted by the National Health Service to improve the compensation of these nurses, but such methods have been considered to be ineffectual in terms of their retention (Shields and Ward-Warmedinger, 2001).

Another study conducted on the topic of nurse satisfaction within the public sector found that the most important elements which brought about nurse satisfaction comprised of the quality of working relationships, adequate staff on hand with the expertise to cope with their workload and also to a lesser extent, achieving advancement in both their professional and personal lives. However, unequal nursing experiences such as the disparity of nurses with ward managers, increased pressure and managerial responsibilities for ward managers, and fewer responsibilities for nurses with lower grades are all contributing not only to the dropping level of healthcare, but also to the decreasing level of job satisfaction within the NHS (Adams and Bond, 2000).

4.2.5 Standard of Care

As an organization, the National Health Service has always been one that has endeavored to serve the public. It has introduced several new quality initiatives and practices which are indicative of macro and micro level support toward the betterment of quality healthcare (Ritchie, 2002). However, with increasing costs and decreasing quality of healthcare provided, it is inevitable that the National Health Service would take on certain corporate tactics in order to safeguard its interests. One of these is the implementation of costing systems in the United Kingdom. Costing systems are similar to the payment for performance systems which exists in the Health Maintenance organizations of the United States. However, measuring performance

only seems to work to a certain extent and the costing systems do not completely measure the non-monetary factors involved (Druker, 2003).

Despite all the measures which have been put in place by the National Health Service to provide a better quality of service in the healthcare industry, their efforts may not have shown the desired results. Two newspaper articles which date back to 2004 have found that less than half of the hospitals under the National Health Service have a good or excellent rating of cleanliness (Meikle, 2004). The issue is even more profound taking into account that there is no health legislation in place to close down hospitals which have a 15-count higher rate of infection more than the next safest country, which costs the National Health Service one billion pounds a year (Sergeant, 2003).

Another news item shows that reforms made to simplify the pay structure of dentistry within the National Health Service have not only caused dentists to boycott the new contract but also found fewer patients who saw a dentist on the introduction of the contract, as compared to two years prior it (Smith, 2008). Additionally, despite the National Health Service's drive toward establishing quality service within its organization, it has not shown any positive results from its previous efforts (Gainsbury, 2009). Even proposals to cut costs have met limited success, with little or no increase in productivity (Bowcott, 2009).

Nevertheless, there have been other proposals which started within the NHS that have shown promise. The advent of the Nursing Development Officer has created a significant contribution within the NHS, especially toward increasing the performance and skills of nurses inhabiting the lower working grades. It has been found that the introduction of NDO's has significantly improved the healthcare performance of nurses working in other grades as well (Webb, 1998).

On the other hand, there have been several studies with conflicting reports regarding both the positive and negative effects of clinical supervision within the NHS. Studies have shown that with the increasing cost of healthcare, it may be more prudent for the NHS to concentrate its supervision of nurses on junior grade nurses rather than any other grade in order to provide much need guidance and support during their early years as practitioners (Teasdale, Brocklehurst and Thom, 2000).

Additionally, the development of assistant/associate practitioners within the NHS has helped the organization cope with increasing future demands for well-trained individuals who can be a part of their patient focused workforce. The cost effective nature of the associate practitioners' role within the organization has made them a valued unit. The positive nature of these positions is also creating an increase in support for these individuals to inhabit fully qualified positions (Leach, 2009).

Other proposals that have been set forth include the advent of primary care mental health workers who are primarily trained to treat mental health as a part of an individual's primary healthcare package. The line of thinking behind this idea is that majority of the issues associated with primary healthcare in medicine are directly related to mental health, thus the creation of such a position creates a method to improve services. Despite concerns regarding inter-professional tensions and quality of healthcare, the program has shown to be quite successful with the only problematic factor of the retention rate among primary mental health workers (Harkness, Bower, Gask and Sibbald, 2005).

4.2.6 National Health Service Public Private Partnerships

The private sector has always worked alongside the National Health Service since 1948. In 1997, 12 million people in the United Kingdom were covered by companies such as insurance

companies, friendly societies and cash plan companies—with 7 million people being covered by private health insurance (Doyle and Bull, 2000). In an effort to deliver better quality healthcare to its constituents, the National Health Service has outsourced some of its services to private organizations, allowing them to take up the tasks and the risks associated with them (Akintoye, Beck and Hardcastle, 2003). The National Health Service not only make contracts to private providers, they also engage with various psychiatric services which encompass the needs of the elderly, women who have had their pregnancy terminated, as well as waiting list initiatives. Other services outsourced quite recently include several wellbeing centers for elderly individuals and for those with mental health issues such as dementia (Department of Health, 2009). The Medicines Information Project has been outsourced to private companies. The task within the project required the establishment of an online medicine guide with links to information about the conditions and various treatment options available. Surveys, in relation to its success, have found that 88 percent of individuals find the information useful and 85 percent find it trustworthy (Pharmaceutical Forum, 2008).

4.2.7 Working Conditions in the National Health Service

The National Health Service and its fundamental public structure differ in several ways from the private sector. The main differences from the private sector mainly occur in a managerial policy for financial incentives. Workers within the National Health Service do not receive as many benefits as in the private healthcare system and cannot opt to challenge their contracts in order to receive more benefits. This is due to the fact that an NHS staff position must keep abreast with the standardized salary within their organization and to pay within range of it. Private companies allow individuals to act as autonomous bodies who can negotiate for better rates, benefits and private health insurance policies. Additionally, there are also other benefits

offered by private companies that the National Health Service simply does not offer such as access to training programs, an opportunity for pro bono work as well as access to better facilities (Private Health Advice, 2009). Despite all these factors, it does not mean that the organization does not recognize the need for recruitment and retention of their staff as well as to reward them for their efforts. The National Health Service has set out several strategies in order to improve the working conditions of their employees. This includes, but is not limited to, offering childcare support, flexible timings, an option for reduced hours, career support, annual hour arrangement, and team-based employee self-rostering. They have also committed creating a more organic working environment by having better arrangements, practices and managers for their staff (Department of Health, 2000). However, their actions have not reflected their intentions especially in the case of minorities. In an editorial for a British medical journal, Esmail and Carnall have written that there is still widespread discrimination in the medical profession which is permeated in every facet from examinations to job applications (cited in Fearfull and Kamenou, 2007).

Another study which considered the experiences of African women in the United Kingdom National Health Service found that they had an overall negative experience working in the said country. They found themselves to be victims of discrimination in pay, in terms of responsibilities and were also exploited by their supervisors (Likupe, 2005).

4.2.8 Critical Overviews

On the 4th of October 2007, the Department of Health published a report known as *Our NHS, Our Future: Next Stage Review: Interim Report*. This publication spoke about the findings on the National Health Service reform and detailed various changes which were dedicated toward a 10-year vision for the National Health Service. The vision was shaped from the

responses received by the staff and their patients in order to lead to a fairer and more personal survey version of the healthcare system which places more responsibility in the hands of the NHS staff (Department of Health, 2007).

However, there are continued efforts on the part of the National Health Service to establish equality of pay while ensuring a constant high standard of healthcare within the system. There are several unions in the United Kingdom which are against government set pay ranges. These individuals may feel that with the current rate of inflation and economic downturn, such wages do not reflect their employment conditions and requirements within the National Health Service. Members of this union have voted 53 percent in favor of the strike and 76 to 23 percent in favor of the action which comes just short of going on strike (BioPortfolio, 2008).

To combat this, the National Health Service is currently undergoing a system of pay modernization where most of its staff is seeing increases in basic pay so as to increase recruitment and retention of its employees. However, with the budget for the NHS increasing every year, there is a consensus that the NHS will not be able to award a pay increase greater than 2.5 percent (GMB, 2005). The increasing costs can be attributed to various reasons which include, but are not limited to the growing cost of new medical technologies. The ever-increasing budget of the National Health Service has also led them to propose cuts in several areas of healthcare such as one in the region of Heatherwood and Wrexham Park NHS Trust, where they have reduced available services to two Medical Wards, one Gynecology Ward and one Walk-In Medical Assessment Unit (GMB, 2009).

Despite these issues, the NHS has endeavored to put several proposals in place in order to ensure that a high rate of retention remains among its staff. Recently, a study found that the National Health Service Trust has begun encouraging nurses who left their positions because of

domestic matters to return to work full time. The increased shortages within the nursing sector have led to the creation of various returns to practice programs which have shown a generally positive outlook on the part of the returning nursing staff (Barriball, Coopamah, Roberts and Watts, 2007).

With the latest NHS dentistry bill plummeting the standards of care and patient inflow within the organization, the National Health Service has created a review aimed at not only providing quality care for its patients but also at a compatible level of pay for its doctors and nurses. The review itself spoke of the current dismal state of the NHS dentistry and how providing access to the quality healthcare for patients and fair pay for its employees has become an issue over the last few years (Department of Health, 2009).

With these issues facing the National Health Service in the future, it has been predicted that the National Health Service would undertake in an enterprise that is focused toward Market based healthcare. Meaning, they would outsource more from companies in the private sector. Secondly, they may provide a more tightly regulated healthcare distribution system or finally, they may have a selective market for providing healthcare with various services being planned to offer only sustainable care pathways (Lewis and Dixon, 2005).

4.3 Summary

This chapter will discuss secondary research findings using the National Health Service as a case study. The secondary sources discussed will use all relevant material such as books, journal articles, publications from the National Health Service website and newspaper articles that have been reviewed by an individual or a group of individuals who are involved with a study or have performed extensive research within an area which is directly or indirectly related to the main question of this dissertation.

The use of job evaluations in the NHS did not begin until the establishment of the First Job Evaluation Working Party in 1992. Although the use of kite marking schemes was not successful, it allowed the NHS to realize that they must tailor their schemes to their own organization. In an effort to ensure pay equity, they have launched several programs in the last few years. The inception of these programs has not improve the working conditions and general satisfaction among employees of the organization and it has even led to a decrease in the quality of healthcare and reliance on outsourcing to private companies.

It is possible that with its increasing budget, the National Health Service will change its mode of operations to a market driven, tightly regulated or selection-based healthcare provision system. It has brought about several new proposals and positions within its organizations to ensure better quality of healthcare and a well-established work force within its organization. Positions such as those of the associate practitioner, primary care mental health worker and nursing development officer have brought positive changes within the healthcare quality of the organization. Though, it must be observed that job satisfaction is still a huge issue within the organization especially in the case of nurses who now experience greater levels of stress due to shortage of nurses in the public sector.

These factors and others such as discrimination of foreign workers within the NHS necessitate a system that is created to work more toward the retention of its staff and improving healthcare rather than appeasing stockholders.

Chapter 5: Conclusions

In light of this research, it can be concluded that pay equity and job evaluation in the scenario of NHS are cases that require extensive research and development. The research has also disclosed the fact that if job evaluations are performed without the establishment of appropriate systems, it shall only serve to contribute red tapes to the scenario and fail to promote pay equity. Furthermore, the critical literature review has allowed the research to conclude on the note that the NHS job evaluation system requires broad modifications and may require a complete overhaul if *First Steps of the Journey: Job Evaluation for Agenda for Change* by Angela Watts and Simon Green, and *Job Evaluation for Clinical Nursing by Implementing the NHS JE System* by Emin Khaya and Nurtel Oral were to be given consideration. By reading the Literature Review and the Secondary Research, it can be clearly seen that the following conclusions to the research questions detailed above have been reached.

5.1 Implementation of Job Evaluation to Achieve Pay Equity

The secondary research regarding the effectiveness of job evaluation establishing pay equity in the National Health Service has found that the National Health Service has improved its system of pay quite considerably when compared to the last 50 years. The new system does not seem to serve the staff employed at the National Health Service; rather it simply seems to be an image for the company to attract investors.

It is understood that the current job evaluation scheme within the National Health Service is the result of trial and error and its establishment has brought a greater deal of equality regarding compensation within the organization. However, there is evidence of the use of such system for job evaluation toward the establishment of confidence in the Health Service, on the part of the shareholders rather than on its employees (Chang 2007) that has created a detrimental

effect on the image of the organization. It is not surprising then to see surveys which [detailed] previous researches conducted, showing only 25 percent of individuals being dissatisfied with their company's job evaluation techniques (Armstrong and Baron 1995, p. 279-84). In contrast, other surveys conducted in hospitals show a number of nurses being dissatisfied with their job experience.

Previous studies also show a direct correlation between quality of health and job satisfaction among individuals in the field of healthcare (Humphrey, et al. 2003). The relative decrease in performance levels of the NHS, as seen in the secondary research provided, as well as studies regarding the general dissatisfaction of nurses in this sector may not show how the NHS has not established pay equity (Newman, Maylor and Chansarkar 2002). However, studies showing a discrimination in compensation toward foreigners and other issues that exhibit a correlation between job satisfaction and pay grade present how the organization has failed in establishing pay equity.

The ongoing pay increases and major changes within the organization toward delivery of quality healthcare rather than looking after its financial concerns is a step in the right direction. In addition, it has shown improvement in pay equity within the organization. It has illustrated how such issues – which were prevalent within the National Health Service decades ago – have begun to improve these days, where there have been several legislations passed by the parliament of the United Kingdom. Despite all these measures, it seems that the NHS has not provided individuals with pay equity within their organizations. The incessant discrimination and unequal pay within gender roles indicate a certain kind of behavior that the NHS has no right to possess.

5.2 Promotion of Job Equity under Public Private Partnerships

The secondary research collected has shown that the responsibilities regarding job equity within the private sector of organizations is not the function of the National Health Service, rather it is the exclusive function of the private companies themselves. The relation between the private sector and public sector transpires on service for funds which does not involve job equality within organizations. The secondary research data shows how the National Health Service does not directly affect the employment decisions of its private contractors.

5.3 Pay Equity Improving Working Conditions

From the research data collected, it may be concluded that the establishment of pay equity within the National Health Service has improved working conditions in the public sector but it should be noted that it is not the only factor which is a determinant in this case. The continued pursuit for the shareholder confidence rather than quality of healthcare by the National Health Service has led to a decline in recruitment of healthcare professionals and to the actual quality of healthcare. It has also led to problems within the organization in retaining nurses whose shortage will further affect the quality of healthcare in the coming years (Newman, Maylor and Chansarkar, 2002).

Other factors such as the elimination of discrimination and harassment of staff, along with better management of resources and a greater drive toward establishing a quality system of care, are far more important in this case in accordance with the personal survey given above which are in the process of being addressed by the public sector. However, the ineffectivity of such measures toward the establishment of proper pay equity and hence of better working conditions, may be one of the primary reasons for the numerous problems currently faced by the National Health Service.

It must be said, however, that the National Health Service has not reached its goals of pay equity within its organization despite the establishment of job evaluation schemes.

5.4 Recommendations

- The National Health Service must establish a job evaluation system which is not only centralized to the organization but takes other factors—such as cumulative workload, geographical position, and the employees’ working environment—into consideration.
- The National Health Service must pass proposals within its organization that work toward the principles of job equity as well as stop discrimination and harassment of ethnic and disabled people. It should conduct studies within its organization to gauge the factors behind any incidents of discrimination or harassment, and endeavor to find lasting solutions for them.
- The NHS must realize that a public-private partnership does not absolve them of the responsibility for actions taken within the private sector. It is their responsibility to ensure that standards are met and the satisfaction of individuals working both in the public and private sector is taken into account.
- The increasing reliance on a strategic outlook rather than one which focuses on delivering quality healthcare to its constituents has brought the drop in healthcare quality and general dissatisfaction among patients and employees in the NHS. Their focus must change toward establishing quality protocols while ensuring financial viability.
- The National Health Service can end its reliance on private organizations to take on the responsibilities of its work load and establish new avenues where they can meet their own organizational needs.

- The NHS can conduct research within its own organization and take the opinion of various doctors and nurses on how to improve working conditions and quality of healthcare without sacrificing excessive funds to accomplish this objective.
- The NHS can establish training programs within its organizations for individuals in nursing and managing positions, with the cost of such programs being paid by the organization itself.
- It is essential for the NHS to shift its focus away from the shareholders and move toward its patients and delivery of quality healthcare, with greater emphasis on primary prevention.
- The NHS should tailor their performance evaluations according to variables which can affect the performance of various institutions such as hygiene, geographical position, socioeconomic standing, number of staff, availability of equipment, and others.

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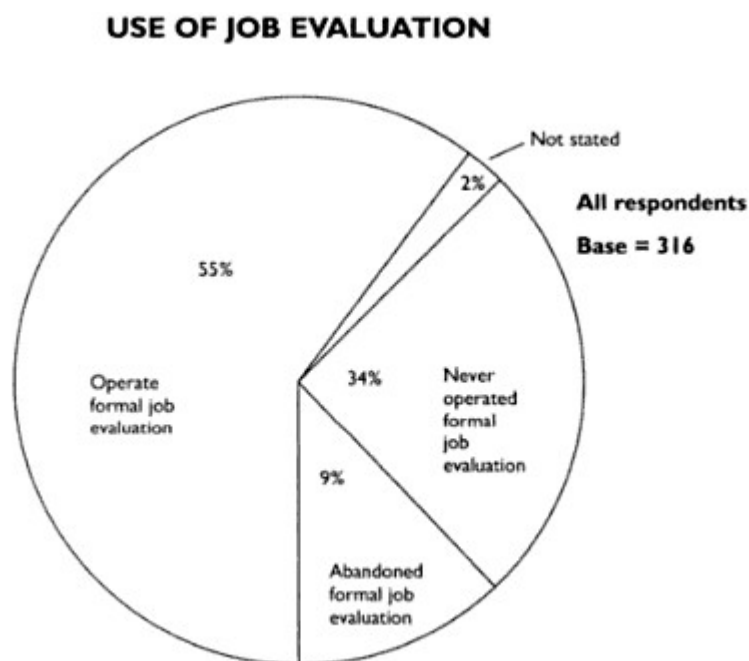
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Appendices

Appendix 1: These tables and charts, reproduced from the *Job Evaluation Handbook*, can be found on pages 279 to 284.



PROPRIETARY BRAND SCHEMES

N = 79 (68% respondents with formal job evaluation)

| Scheme | % of respondents employing a proprietary brand scheme using this scheme for all or some jobs |
|-------------------------------------|--|
| Hay Guide Chart – Profile Method | 78 |
| Watson Wyatt – EPC | 5 |
| Towers Perrin WJQ | 5 |
| PE Points & Direct Consensus Method | 4 |
| Institute of Office Administration | 3 |
| KPMG Equate | 2 |
| PA Consultancy | 2 |
| Price Waterhouse Profile Method | 2 |
| Other | 14 |

Base = 118

Figure 16.3

PROPRIETARY BRAND SCHEMES

(% respondents with formal job evaluation)

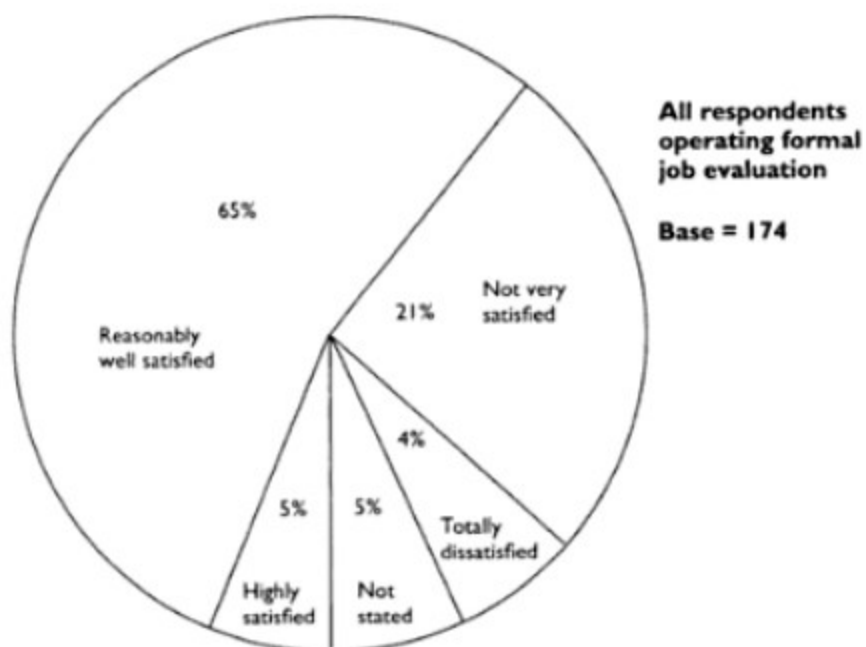
| Scheme | % of respondents with a proprietary brand scheme using scheme to evaluate all jobs | PRC N = 79 (68%) | | | |
|------------------------------------|--|--|---|--|--|
| | | % respondents using scheme for managerial employees only | % respondents using scheme for Admin./Clerical employees only | % respondents using scheme for technical/professional employees only | % respondents using scheme for manual employees only |
| | | 46 | 27 | 32 | – |
| Hay Guide Chart – Profile Method | 28 | – | – | 1 | – |
| Watson Wyatt – EPC | 4 | 2 | 1 | 1 | – |
| Towers Perrin – WJQ | 4 | 3 | 3 | 3 | – |
| PE International | 2 | – | 3 | – | – |
| Institute of Office Administration | – | – | – | – | – |
| KPMG Scheme | 2 | – | 2 | 2 | – |
| PA Consulting | – | – | – | – | 2 |
| Price Waterhouse Profile Methods | – | – | – | – | 2 |
| Other | 2 | 3 | 6 | 5 | 6 |

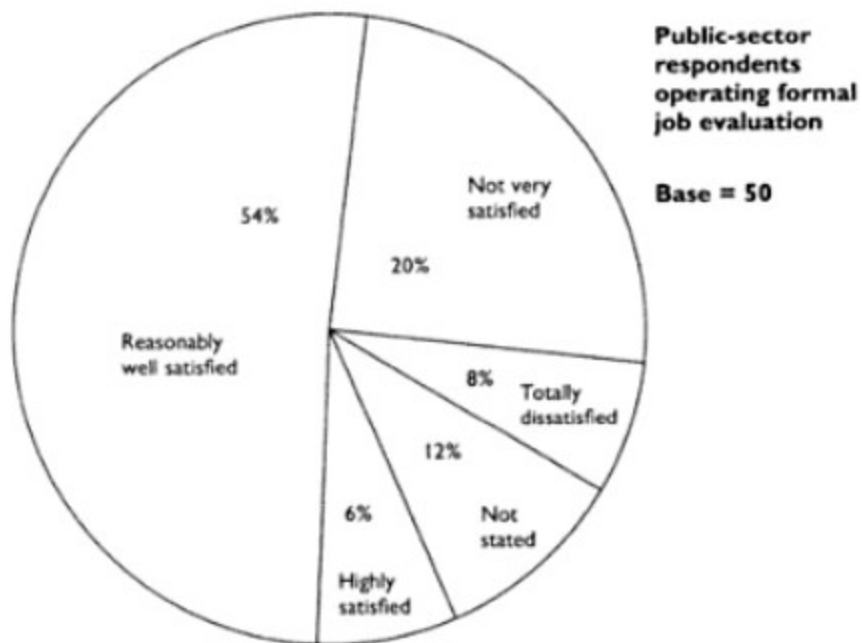
NON-PROPRIETARY BRAND SCHEMES

| Process | % of respondents with formal job evaluation but no proprietary brand scheme using process |
|----------------------|---|
| Points-factor rating | 29 |
| Job classification | 21 |
| Factor comparison | 11 |
| Competencies | 9 |
| Skills | 3 |

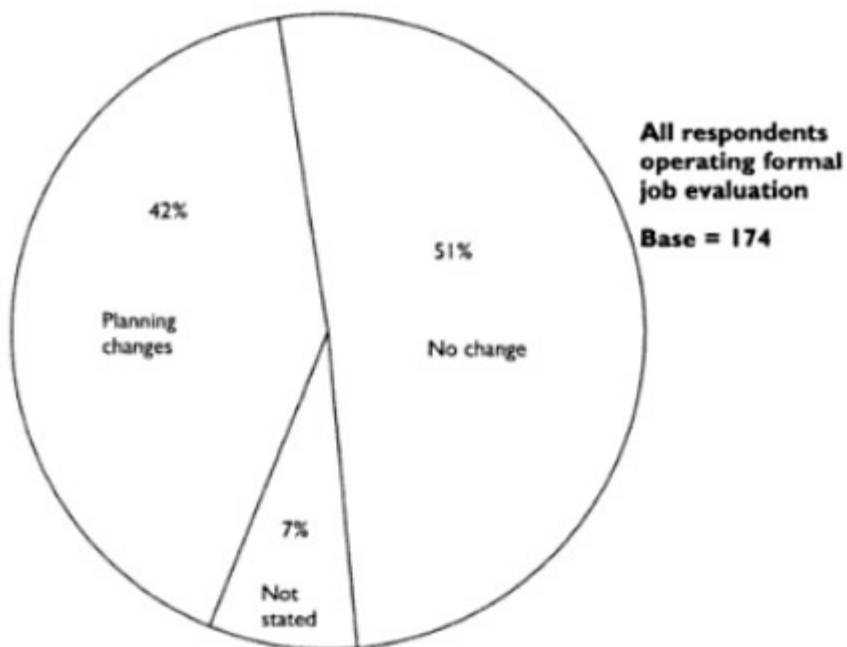
Base = 51

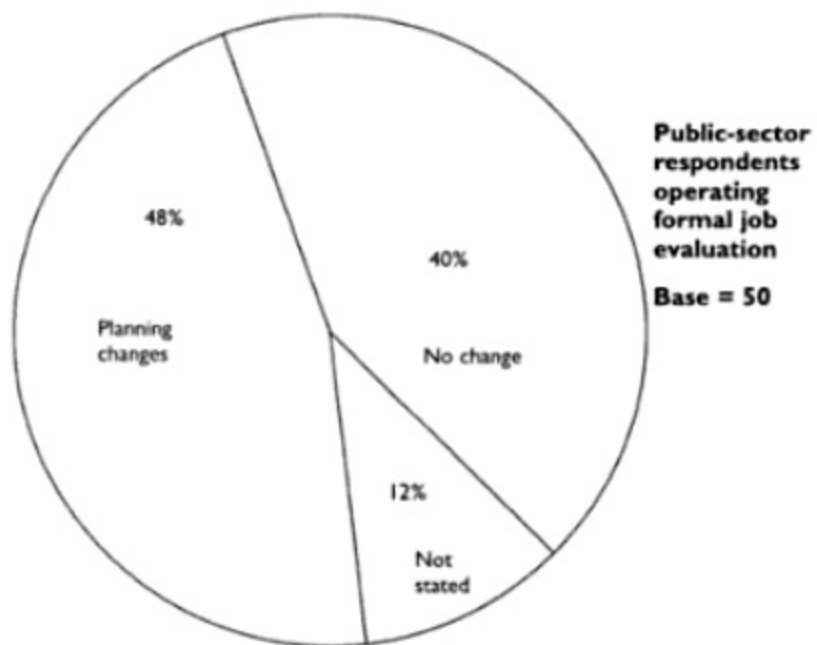
SATISFACTION WITH EXISTING JOB EVALUATION ARRANGEMENTS





PLANNED CHANGES TO JOB EVALUATION OR PAY STRUCTURES





Critical Appraisal

SYSTEMATIC REVIEW: The validity of the results in the personal survey may be questioned due to their unethical nature and the absence of any affiliation with the National Health Service (NHS). However, they do provide a conflicting viewpoint with the secondary research data collected that shows a much better perception of the public towards the National Health Service than what may be indicated by the studies mentioned. However, a conclusion was reached that the NHS has not successfully implemented job evaluations due to their current efforts towards establishing pay equity within their organization. In addition, they have not also they pursued pay equity within the private sector, and this in turn has caused problems regarding pay equity and the quality of healthcare and work environment in reference to their patients and their employees respectively.

The statistical information related to the systematic review has been provided within the Personal Survey, Secondary Research, previous studies in the literature review, and the appendix.

The first study is a survey from the job evaluation handbook. This survey found the percentage of individuals using job evaluation techniques in the private and public sectors. It also provided information regarding its use in the organization, and satisfaction levels and types of evaluation and pay equity techniques employed. It concluded by showing that job evaluation was widely used as a proprietary system in private companies, while public companies used derivative systems.

The second is a research from the department of health which found that the biggest constraint facing healthcare was the shortage of resources.

The third is a survey of the retention and recruitment rates of nurses in the National Health Service, which found that the biggest issues facing the organization was the retention of nurses already recruited. It also found out that job satisfaction was the number one reason for nurse retention.

The fourth study considers the real world effects of the NHS policy, and found out that they had real world effects regarding the quality of healthcare despite not being intended for such a purpose.

The fifth study showed how the balanced scorecard employed for the performance review by the NHS is not an indicator of performance, but rather an indicator to safeguard the organization's financial concerns.

The sixth study shows how doctors do not appreciate such reviews and consider them a compulsion upon them rather than an opportunity.

The final study shows how some of the problems inherent in the NHS working conditions are due to the lack of training among its managing staff.

| What question (PICO) did the systematic review address? | |
|---|--|
| What is best? | Where do I find the information? |
| The main question which is endeavored to be answered in this dissertation is, 'Does NHS implement a poor job evaluation | The research questions to be answered can be found in Chapters 1.6 and 1.7, while the Literature Review in Chapter 2 and the |

| | |
|---|---|
| <p>system which undermines the successful implementation of the principles of pay equity in the healthcare organizations?’ In order to answer this question, three sub questions are asked. These questions are answered by the use of various literatures which are both directly and indirectly related to the topic, as well as a personal survey conducted by the researcher. The results found that the NHS had not successfully implemented the principles of pay equity but observed that there were several improvements in pay equity within the organization.</p> | <p>Personal Survey and Secondary Research in Chapter 4 encompass the information used to derive the conclusions given in Chapter 5.</p> |
| <p>This paper: Yes Comment: The questions were addressed and the relevant information required to answer them was collected.</p> | |
| <p>F - Is it unlikely that important, relevant studies were missed?</p> | |
| <p>What is best?</p> | <p>Where do I find the information?</p> |
| <p>The secondary research detailed several studies from scholarly sources, as well as newspaper articles which detailed critical reviews of both NHS performance, job evaluation and also the working environment for both doctors and nurses. There were also studies focused on the performance of the public sector in comparison to the private sector.</p> | <p>Methods: Searches were conducted using the internet and local libraries in order to find books which focused on job evaluation and pay equity. All official documents from the NHS were released on the NHS website and local libraries were used to research newspaper articles which directly provided an appraisal of NHS performance.</p> <p>Results: There were several studies found which relayed information regarding the methodology and importance of job evaluations. There were also several studies found which considered if the current proposals adopted by the NHS were helping or harming their status as a public health service. Though there was no direct study which encompassed all of these search criteria, inference from the researcher was required. All figures are catalogued in the index and appendices. It is conceivable that certain studies were missed; however, most of the relevant studies are present, which allowed this researcher to attain an accurate conclusion.</p> |

| | |
|---|---|
| <p>This paper: Yes Comment: The information gathered may be incomplete and is missing certain studies although the studies do confer the researcher with the information necessary to answer the primary question of this dissertation.</p> | |
| <p>A - Were the criteria used to select articles for inclusion appropriate?</p> | |
| <p>What is best?</p> | <p>Where do I find the information?</p> |
| <p>The criteria required that all journal articles be from peer-reviewed sources. Information gained from books was verified by the use of journal articles and other literature, while all information provided from websites was insured to be from well-known organizations with projects related to the topic being researched.</p> | <p>Methods: Journal articles which were not peer-reviewed were excluded from the dissertation. This was also true for books which could not be verified by cross checking. Newspaper articles were insured to be from well-known newspapers while websites were excluded unless they were UK organization-based or well-known and updated.</p> <p>The terms used to search for these articles were the following:</p> <ul style="list-style-type: none"> Job evaluation Pay equity Job evaluation in public sector Job evaluation in private sector Pay equity in public sector Pay equity in private sector Job evaluation in NHS Pay equity in NHS NHS NHS performance review NHS proposals Job equity in NHS |
| <p>This paper: Yes Comment: The criteria for the inclusion of articles insured that the information provided within the dissertation was as accurate as possible. It also ensured that all sources could be used without any reason for conflict due to the information provided.</p> | |
| <p>A - Were the included studies sufficiently valid for the type of question asked?</p> | |
| <p>What is best?</p> | <p>Where do I find the information?</p> |
| <p>The research study did not sufficiently meet the valid criteria to answer the type of questions asked within the dissertation. However, the other studies provided met the criteria mentioned above and were chosen based on their relation to the current topic.</p> | <p>Method: The validity of the personal survey was contingent upon its authorization by the department of health or any other governing body or organization. Meanwhile, the validity of the other research was contingent upon the criteria mentioned above.</p> <p>Results: The quality of the studies provided met the criteria detailed above and were thus used to form a conclusion to the research question put forth. However, the personal</p> |

| | |
|--|--|
| | survey did not meet these criteria. |
| This paper: Yes Comment: The majority of the information detailed in this paper and the information used to correlate the findings were chosen under strict criteria detailed above. | |
| T - Were the results similar from study to study? | |
| What is best? | Where do I find the information? |
| Most of the studies showed a correlation in the information given. Meanwhile, the personal survey taken by the researcher did not conform to the information gained from various studies. | Results: The results of the studies provided in Chapters 2 and 4 showed a correlation which allowed the researcher to form a conclusion regarding the research questions. On the other hand, the personal survey showed information which strongly disagreed with this hypothesis. |
| This paper: Yes Comment: Since the information in the personal survey was not employed, the results of the remaining surveys were given more credence within the dissertation and allowed to form the final conclusion despite the opposite contentions of the personal survey. | |

What were the results?

The results showed that the NHS has implemented a poor job evaluation system which undermines the successful implementation of the principles of pay equity in the healthcare organizations.

How are the results presented? The results were presented as a series of answers to the sub questions asked in the first chapter. The answers to these sub questions were used to form the conclusion given above. This conclusion was followed by recommendations to the National Health Service on how to successfully implement job evaluation for pay equity.

Appendix 2: Critical Appraisal Skills Program (CASP)

A critical analysis of job evaluation for clinical nursing by implementing the NHS JE system by Emin Khaya and Nurtel Oral.

Was there a clear statement of the aims of the research?

Yes

2. Is a qualitative methodology appropriate?

No

The research required the use of quantitative methodology.

Detailed questions

Appropriate research design

3. Was the research design appropriate to adequately address the aims of the research?

Yes, the research design was appropriate to adequately address the aims of the research. An analysis based on the 9 bands was included and a survey questionnaire was used to carry out the research.

4. Was the recruitment strategy appropriate adequately to the aims of the research?

The Participants of the study were the participants that participated in this project are nurses and the supervisor of nurses that belong to regional and local hospitals.

Data collection

5. Were the data collected in a way that adequately addressed the research issue?

The researcher justified the methods used in the study and has not modified the method during the study in order to form a consistent outcome.

6. Has the relationship between researcher and the involved participants been adequately considered?

The relationship between researcher and the involved participants remains unaddressed in the research article.

Ethical Issues

7. Have ethical issues been taken into adequate consideration?

Even though the researcher has not discussed how the ethical standards of the study were maintained the criterion utilized in the research is one that leaves little room for violation of research ethics.

Data Analysis

8. Was the data analysis sufficiently rigorous?

The data analysis was designed to be continuously rigorous with respect to the implementation of the research methodology of the research.

Findings

9. Is there a clear statement of findings?

The findings of the study are clearly presented and highlighted. The evidence is adequately discussed in order to reach a concise conclusion by use of the findings presented.

Value of the research

10. How valuable is the research?

The research furthers the existing knowledge of the National Health Service regarding its performance appraisals and also provides new avenues in which this study may proceed further.

Critical analysis of Job and Work Evaluation by Robert L. Heneman

1. Was there a clear statement of the aims of the research?

Yes

2. Is a qualitative methodology appropriate?

Yes

Detailed questions

Appropriate research design

3. Was the research design appropriate to address the aims of the research?

The research has been designed to follow a qualitative analysis and rests primarily on the literature review.

Sampling

4. Was the recruitment strategy appropriate to the aims of the research?

The research made use of literature that pertained specifically to the subject of the research.

Data collection

5. Were the data collected in a way that addressed the research issue?

The data was extracted from the literature review in a justified manner.

Reflexivity (research partnership relations/recognition of researcher bias)

6. Has the relationship between the researcher and the participants been adequately considered?

No such explanation was provided since no primary data was used.

Ethical Issues

7. Have ethical issues been taken into consideration?

The research does not address any ethical issues at any point in the article.

Data Analysis

8. Was the data analysis sufficiently rigorous?

The data analysis was sufficiently rigorous since it made use of charts, diagrams and extensive elaborations.

Findings

9. Is there a clear statement of findings?

The author has presented a section regarding the research's summary and conclusion, and has singled out the major findings from the literature review as well.

Value of the research

10. How valuable is the research?

The research makes a significant contribution to the understanding of the impact of different variables in job and work evaluation procedures and perceptions.

First Steps of the Journey: Job Evaluation for Agenda for Change by Angela Watts and Simon Green

1. Was there a clear statement of the aims of the research?

Yes

2. Is a qualitative methodology appropriate?

Not entirely

The research employs the use of existing secondary research data in order to form conclusions in relation to the subject matter and leaves a significant part of the research area untouched.

Detailed questions

Appropriate research design

3. Was the research design appropriate to address the aims of the research?

The researcher has not presented the research methodology separately and has not given the research design details at any point.

Sampling

4. Was the recruitment strategy appropriate to the aims of the research?

No participants were recruited into the study since there was no primary data involved.

Data collection

5. Were the data collected in a way that addressed the research issue?

The collection of data was structured around the research subject and continued to proceed in an almost hierarchal manner of analysis through the article.

Reflexivity (research partnership relations/recognition of researcher bias)

6. Has the relationship between researcher and participants been adequately considered?

The researcher has not considered the inherent limitations.

Ethical Issues

7. Have ethical issues been taken into consideration?

Ethical considerations were not raised or taken into consideration during this study.

Data Analysis

8. Was the data analysis sufficiently rigorous?

The data analysis was not what could be referred to as rigorous since the various themes of the data were merely presented in the article and were not critically evaluated.

Findings

9. Is there a clear statement of findings?

A brief Results & Outcomes chapter constitutes the findings of the research.

Value of the research

10. How valuable is the research?

The research is valuable in providing a decryption of aspects pertaining to job evaluation but does not present any significant findings.

A revision of a job evaluation system by Emin Kahya

1. Was there a clear statement of the aims of the research?

Yes

2. Is a qualitative methodology appropriate?

No

The research had to make use of a mixed approach in order to deliver a significant conclusion.

Detailed questions

Appropriate research design

3. Was the research design appropriate to address the aims of the research?

The researcher has justified the research design given within the study and has decided the methodology for the survey questionnaire.

Sampling

4. Was the recruitment strategy appropriate to the aims of the research?

The research incorporates a realization of the necessity of an appropriate recruitment strategy and has followed one that is in line with the aims of the research.

Data collection

5. Were the data collected addressed the research issue in a way?

The setting for data collection and the methodology for data collection are justified. The methodology used to reach their conclusions is also justified.

Reflexivity (research partnership relations/recognition of researcher bias)

6. Has the relationship between the researcher and the participants been adequately considered?

The relationship between the researcher and the participants has not been considered.

Ethical Issues

7. Have ethical issues been taken into consideration?

The ethical issues inherent within the research have been considered and have been taken into account.

Data Analysis

8. Was the data analysis sufficiently rigorous?

The data analysis is sufficiently rigorous. The author has provided an in depth description of the data collected as well as tables and charts depicting the data which has been collected.

Findings

9. Is there a clear statement of findings?

There is no clear statement of findings while conclusions relating to the research have been appropriately discussed.

Value of the research

10. How valuable is the research?

The research contributes to the paper by giving recommendations regarding the issues discussed within the study.

An Analysis of Job Evaluation Committee and Job Holder Gendered Effects on Job Evaluation by Chad T. Lewis and Cynthia Kay Stevens

1. Was there a clear statement of the aims of the research?

Yes

2. Is a qualitative methodology appropriate?

No

The methodology used is highly quantitative and is appropriate for the research since the researcher has used a questionnaire in order to reach a conclusion.

Detailed questions

Appropriate research design

3. Was the research design appropriate to address the aims of the research?

The research design is justified to address the aims of the research, and the study constitutes a discussion on the methodology employed as well as the reasoning behind the usage of such methodology.

Sampling

4. Was the recruitment strategy appropriate to the aims of the research?

The recruitment strategy was not as appropriate as needed for this research and was far too narrow than what would have been ideal for the case of this particular research.

Data collection

5. Were the data collected in a way that addressed the research issue?

The data collection within the research was mentioned in detail in the article. Moreover, the form of data collected has also been clearly presented.

Reflexivity (research partnership relations/recognition of researcher bias)

6. Has the relationship between the researcher and the participants been adequately considered?

The researcher has not adequately considered this relationship as the potential bias and influence of the researcher has not been examined.

Ethical Issues

7. Have ethical issues been taken into consideration?

The ethical issues within the research as well as the maintenance of ethical standards have not been considered within the research.

Data Analysis

8. Was the data analysis sufficiently rigorous?

The researcher has provided an in depth description of the data analysis and has employed statistical instruments to do so effectively as well.

Findings

9. Is there a clear statement of findings?

The findings have been discussed under the Results section. However, the credibility of the findings has not been discussed.

Value of the research

10. How valuable is the research?

The value of the research and the contribution the study makes to the existing knowledge of the issue in question have not been discussed. However, the research remains imperative to this study since it assists in the elaboration of factors that were essential to job evaluation.

Designing a Comparable Worth Based Job Evaluation System: Failure of and a Priori Approach was written by Jonathan Tompkins, Joyce Brown and John H. McEwen.

1. Was there a clear statement of the aims of the research?

Yes

2. Is a qualitative methodology appropriate?

Yes

Detailed questions

Appropriate research design

3. Was the research design appropriate to address the aims of the research?

The research design was appropriate to address the aims of the research in consideration of the fact that it sought to develop a procedure and not to oppose or support a hypothesis.

Sampling

4. Was the recruitment strategy appropriate to the aims of the research?

Primary research was not a part of this study. Therefore, no recruitment strategy had to be formulated.

Data collection

5. Were the data collected in a way that addressed the research issue?

The data was collected through the analysis of previous research studies and the examination of contradictions and similarities between present and suggested methods of job evaluation.

Reflexivity (research partnership relations/recognition of researcher bias)

6. Has the relationship between the researcher and the participants been adequately considered?

The absence of primary data did not allow this question to be raised.

Ethical Issues

7. Have ethical issues been taken into consideration?

The reader is informed of no details regarding whether ethical standards were maintained, and no issues regarding informed consent or confidentiality were discussed.

Data Analysis

8. Was the data analysis sufficiently rigorous?

The researcher has provided an in depth analysis of the process of data analysis but has not taken into account the potential researcher bias within the study.

Findings

9. Is there a clear statement of findings?

The researcher has not provided a clear statement of findings and has proceeded directly to the conclusion.

Value of the research

10. How valuable is the research?

The research attempts to unveil new horizons pertaining to job evaluation and is of the utmost value.